

# 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

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [OXFORD WEST TEL. CO.](#)Signature of authorized officer or employee: [Cindy Bryce](#)

Digitally signed by Cindy Bryce DN:cn=Cindy Bryce, email=cbryce@firstlight.net, O=oxford west tel. co., I=Lewiston ME 04240-7418, Date:3/18/2021

Date: [3/18/2021](#).Printed name of authorized officer or employee: [Cindy Bryce](#)Title or position of authorized officer or employee: [Accounting Mgr.](#)Telephone number of authorized officer or employee: [207-333-3461](#)Study Area Code of  
Reporting Carrier:[100002](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [OXFORD COUNTY TEL. & TELE. CO.](#)

Signature of authorized officer or employee: [Cindy Bryce](#)

Digitally signed by Cindy Bryce DN:cn=Cindy Bryce,email=c Bryce@firstlight.net,O=oxford county tel. & tele. co.,l=Lewiston ME 04240-7418, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Cindy Bryce](#)

Title or position of authorized officer or employee: [Accounting Mgr.](#)

Telephone number of authorized officer or employee: [207-333-3461](#)

Study Area Code of  
Reporting Carrier:

[100019](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [UNITEL, INC.](#)

Signature of authorized officer or employee: [David Dubois](#)

Digitally signed by David Dubois DN:cn=David  
Dubois, email=ddubois@unitel.me, O=unitel, inc., I=Unity ME 04988,  
Date: 3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [David Dubois](#)

Title or position of authorized officer or employee: [CPA, Controller](#)

Telephone number of authorized officer or employee: [207-948-3466](#)

Study Area Code of  
Reporting Carrier:

[100029](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GRANITE STATE TEL., INC.](#)

Signature of authorized officer or employee: [Steven P. Schilling](#)

Digitally signed by Steven P. Schilling DN:cn=Steven P. Schilling,email=sschilling@gsc.tech,O=granite state tel., inc.,l=Weare NH 03281, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Steven P. Schilling](#)

Title or position of authorized officer or employee: [Controller](#)

Telephone number of authorized officer or employee: [603-529-6258](#)

Study Area Code of  
Reporting Carrier:

[120039](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [DUNBARTON TEL. CO.](#)Signature of authorized officer or employee: [David P. Montgomery](#)

Digitally signed by David P. Montgomery DN:cn=David P. Montgomery,email=duntelco@gsinet.net,O=dunbarton tel. co.,l=Dunbarton NH 03046, Date:3/16/2021

Date: [3/16/2021](#).Printed name of authorized officer or employee: [David P. Montgomery](#)Title or position of authorized officer or employee: [President](#)Telephone number of authorized officer or employee: [603-774-9911](#)Study Area Code of  
Reporting Carrier:[120043](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">FRANKLIN TEL. CO.-VT</a>					
Signature of authorized officer or employee: <a href="#">Kimberly Gates Maynard</a>				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:3/22/2021	
Date: <a href="#">3/22/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Kimberly Gates Maynard</a>					
Title or position of authorized officer or employee: <a href="#">Treasurer</a>					
Telephone number of authorized officer or employee: <a href="#">802-285-9911</a>					
Study Area Code of Reporting Carrier:	<a href="#">140053</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

FCC Form 507  
Connect America Fund-Broadband Loop Support Mechanism  
Line Count ReportFCC Form 507  
OMB Control No. 3060-0972

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 507 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 507, Line Count Report for Connect America Fund-Broadband Loop Support Mechanism, on Behalf of Reporting Carrier</b>					
I certify that <u>The National Exchange Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 507 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the actual line count data provided to the authorized agent; and, to the best of my knowledge, the actual line count data provided to the authorized agent is accurate.					
Name of Authorized Agent <u>The 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 Perion</u>				Date <u>03/12/2021</u>	
Printed name of authorized officer or employee <u>MARK DE PERION</u>					
Title or position of authorized officer or employee <u>CONTROLLER</u>					
Telephone number of authorized officer or employee: <u>(315) 324-5911</u> , ext.					
Study Area Code of Reporting Carrier <u>140068</u>		Filing Due Date for this form (mm/dd/yyyy) <u>03/31/2021</u>			
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WAITSFIELD/FAYSTON TEL. CO.](#)Signature of authorized officer or employee: [Roger Nishi](#)Digitally signed by Roger Nishi DN:cn=Roger  
Nishi,email=rnishi@wcvt.com,O=waitsfield/fayston tel. co.,l=Waitsfield  
VT 05673, Date:3/26/2021Date: [3/26/2021](#).Printed name of authorized officer or employee: [Roger Nishi](#)Title or position of authorized officer or employee: [Vice President - Industry Relations](#)Telephone number of authorized officer or employee: [802-496-8336](#)Study Area Code of  
Reporting Carrier:[140069](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

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**Projected Annual Common Line Revenue Requirement Form**

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**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**

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Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [VERMONT TELEPHONE COMPANY, INC.](#)

Signature of authorized officer or employee: [Catherine Euchre](#)

Digitally signed by Catherine Euchre DN:cn=Catherine Euchre,email=ceuchre@vermontel.com,O=vermont telephone company, inc.,l=Springfield VT 05156, Date:3/24/2021

Date: [3/24/2021](#).

Printed name of authorized officer or employee: [Catherine Euchre](#)

Title or position of authorized officer or employee: [Director of Process Engineering](#)

Telephone number of authorized officer or employee: [802-885-7746](#)

Study Area Code of  
Reporting Carrier:

[147332](#)

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

[03/31/2021](#)

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

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**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**

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Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CASSADAGA TEL. CORP.](#)

Signature of authorized officer or employee: [Wade Weatherlow](#)

Digitally signed by Wade Weatherlow DN:cn=Wade Weatherlow, email=wade.weatherlow@dfel.com, O=cassadaga tel. corp., l=Fredonia NY 14063-0209, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Wade Weatherlow](#)

Title or position of authorized officer or employee: [Carrier Relations Manager](#)

Telephone number of authorized officer or employee: [716-673-3091](#)

Study Area Code of  
Reporting Carrier:

[150076](#)

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

[03/31/2021](#)

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<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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">CHAMPLAIN TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Mark Webster</a>				Digitally signed by Mark Webster DN:cn=Mark Webster,email=mwebster@champlaintelephone.com,O=champlain tel. co.,l=Champlain NY 12919, Date:3/22/2021	
Date: <a href="#">3/22/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Mark Webster</a>					
Title or position of authorized officer or employee: <a href="#">Controller</a>					
Telephone number of authorized officer or employee: <a href="#">518-298-2480</a>					
Study Area Code of Reporting Carrier:	<a href="#">150077</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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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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

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Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [CROWN POINT TEL. CORP.](#)Signature of authorized officer or employee: [Shana R. Macey](#)

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:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Shana R. Macey](#)Title or position of authorized officer or employee: [President](#)Telephone number of authorized officer or employee: [518-597-3300](#)Study Area Code of  
Reporting Carrier:[150085](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

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Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [DUNKIRK AND FREDONIA TEL. CO.](#)Signature of authorized officer or employee: [Wade Weatherlow](#)

Digitally signed by Wade Weatherlow DN:cn=Wade Weatherlow,email=wade.weatherlow@dfel.com,O=dunkirk and fredonia tel. co.,l=Fredonia NY 14063-0209, Date:3/15/2021

Date: [3/15/2021](#).Printed name of authorized officer or employee: [Wade Weatherlow](#)Title or position of authorized officer or employee: [Carrier Relations Manager](#)Telephone number of authorized officer or employee: [716-673-3091](#)Study Area Code of  
Reporting Carrier:[150091](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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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Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [GERMANTOWN TEL. CO., INC.](#)Signature of authorized officer or employee: [Bruce C. Bohnsack](#)

Digitally signed by Bruce C. Bohnsack DN:cn=Bruce C. Bohnsack,email=bruceb@gtel.net,O=germantown tel. co.,inc.,l=Germantown NY 12526, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Bruce C. Bohnsack](#)Title or position of authorized officer or employee: [President and CEO](#)Telephone number of authorized officer or employee: [518-537-4835](#)Study Area Code of  
Reporting Carrier:[150097](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [ONEIDA COUNTY RURAL TEL. CO.](#)

Signature of authorized officer or employee: [Heather Kirkland](#)

Digitally signed by Heather Kirkland DN:cn=Heather Kirkland,email=hkirkland@ocrt.com,O=oneida county rural tel. co.,l=Holland Patent NY 13354, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Heather Kirkland](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [315-865-3239](#)

Study Area Code of  
Reporting Carrier:

[150111](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [ONTARIO TELEPHONE COMPANY, INC.](#)Signature of authorized officer or employee: [James E Cheney](#)

Digitally signed by James E Cheney DN:cn=James E Cheney,email=JimC@ottctel.com,O=ontario telephone company,inc.,l=Phelps NY 14532, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [James E Cheney](#)Title or position of authorized officer or employee: [CFO/COO](#)Telephone number of authorized officer or employee: [315-548-8017](#)Study Area Code of  
Reporting Carrier:[150112](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [STATE TEL. CO.](#)Signature of authorized officer or employee: [Mark Evans](#)Digitally signed by Mark Evans DN:cn=Mark  
Evans,email=mevans@statetel.com,O=state tel. co.,l=Coxsackie NY  
12051, Date:3/15/2021Date: [3/15/2021](#).Printed name of authorized officer or employee: [Mark Evans](#)Title or position of authorized officer or employee: [Vice President](#)Telephone number of authorized officer or employee: [518-731-6128](#)Study Area Code of  
Reporting Carrier:[150125](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [TRUMANSBURG TELEPHONE COMPANY, INC.](#)

Signature of authorized officer or employee: [James E Cheney](#)

Digitally signed by James E Cheney DN:cn=James E Cheney,email=JimC@ottctel.com,O=trumansburg telephone company, inc.,l=Phelps NY 14532, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [James E Cheney](#)

Title or position of authorized officer or employee: [CFO/COO](#)

Telephone number of authorized officer or employee: [315-548-8017](#)

Study Area Code of  
Reporting Carrier:

[150131](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">ALTEVA OF WARWICK LLC</a>					
Signature of authorized officer or employee: <a href="#">Virginia O'Hanlon</a>				Digitally signed by Virginia O'Hanlon DN:cn=Virginia O'Hanlon,email=vohanlon@momentumtelecom.com,O=altea of warwick llc,l=Warwick NY 10990, Date:3/24/2021	
Date: <a href="#">3/24/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Virginia O'Hanlon</a>					
Title or position of authorized officer or employee: <a href="#">Regulatory and Tax Compliance Manager</a>					
Telephone number of authorized officer or employee: <a href="#">845-986-2535</a>					
Study Area Code of Reporting Carrier:	<a href="#">160135</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [THE CITIZENS TELEPHONE COMPANY OF KECKSBURG](#)

Signature of authorized officer or employee: [Arnold K. Cutrell](#)

Digitally signed by Arnold K. Cutrell DN:cn=Arnold K. Cutrell,email=arnie.cutrell@ctzn.net,O=the citizens telephone company of kecksburg,I=Mount Pleasant PA 15666, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Arnold K. Cutrell](#)

Title or position of authorized officer or employee: [Treasurer](#)

Telephone number of authorized officer or employee: [724-424-4444](#)

Study Area Code of  
Reporting Carrier:

[170156](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [HICKORY TEL. CO.](#)

Signature of authorized officer or employee: [Terri Jeffers](#)

Digitally signed by Terri Jeffers DN:cn=Terri  
Jeffers,email=tlj@hky.com,O=hickory tel. co.,l=Hickory PA 15340,  
Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Terri Jeffers](#)

Title or position of authorized officer or employee: [Regulatory Director](#)

Telephone number of authorized officer or employee: [724-356-2211](#)

Study Area Code of  
Reporting Carrier:

[170171](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">IRONTON TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Patricia L Stewart</a>				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:3/23/2021	
Date: <a href="#">3/23/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Patricia L Stewart</a>					
Title or position of authorized officer or employee: <a href="#">President</a>					
Telephone number of authorized officer or employee: <a href="#">610-799-0225</a>					
Study Area Code of Reporting Carrier:	<a href="#">170175</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LACKAWAXEN TELECOMMUNICATIONS SERVICES, INC.](#)

Signature of authorized officer or employee: **James J. Kail**

Digitally signed by James J. Kail DN:cn=James J. Kail,email=jjkail@lhtc.net,O=lackawaxen telecommunications services, inc.,l=Stahlstown PA 15687-0168, Date:3/26/2021

Date: [3/26/2021](#).

Printed name of authorized officer or employee: [James J. Kail](#)

Title or position of authorized officer or employee: [President and CEO](#)

Telephone number of authorized officer or employee: [724-593-2411](#)

Study Area Code of  
Reporting Carrier:

[170177](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">ARMSTRONG TEL. CO.-PA</a>					
Signature of authorized officer or employee: <a href="#">David Ames</a>				Digitally signed by David Ames DN:cn=David Ames,email=dames@agoc.com,O=armstrong tel. co.-pa,l=Butler PA 16002, Date:3/15/2021	
Date: <a href="#">3/15/2021.</a>					
Printed name of authorized officer or employee: <a href="#">David Ames</a>					
Title or position of authorized officer or employee: <a href="#">Regulatory Analyst</a>					
Telephone number of authorized officer or employee: <a href="#">724-283-0925</a>					
Study Area Code of Reporting Carrier:	<a href="#">170189</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [ARMSTRONG TEL. CO. NORTH](#)

Signature of authorized officer or employee: [David Ames](#)

Digitally signed by David Ames DN:cn=David Ames,email=dames@agoc.com,O=armstrong tel. co. north,l=Butler PA 16002, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [David Ames](#)

Title or position of authorized officer or employee: [Regulatory Analyst](#)

Telephone number of authorized officer or employee: [724-283-0925](#)

Study Area Code of  
Reporting Carrier:

[170195](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [PALMERTON TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Timothy A. Hausman](#)

Digitally signed by Timothy A. Hausman DN:cn=Timothy A. Hausman,email=THausman@pencor.com,O=palmerton telephone company,l=Palmerton PA 18071, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Timothy A. Hausman](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [610-826-9433](#)

Study Area Code of  
Reporting Carrier:

[170196](#)

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

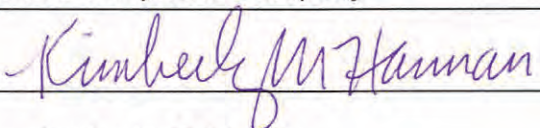
[03/31/2021](#)

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

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>Pennsylvania Telephone Company</b>			
Signature of authorized officer or employee 			Date <b>03/22/2021</b>
Printed name of authorized officer or employee <b>Kimberly M. Hannan</b>			
Title or position of authorized officer or employee <b>GM/VP</b>			
Telephone number of authorized officer or employee: ( <b>570</b> ) <b>745</b> - <b>7101</b> , ext.			
Study Area Code of Reporting Carrier	<b>170197</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2021</b>
<small>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</small>			

Certification-Agent

TRANSMITTAL NO. 1635

**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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">SOUTH CANAAN TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">James J. Kail</a>				Digitally signed by James J. Kail DN:cn=James J. Kail,email=jjkail@lhtc.net,O=south canaan tel. co.,l=Stahlstown PA 15687-0168, Date:3/26/2021	
Date: <a href="#">3/26/2021</a> .					
Printed name of authorized officer or employee: <a href="#">James J. Kail</a>					
Title or position of authorized officer or employee: <a href="#">President and CEO</a>					
Telephone number of authorized officer or employee: <a href="#">724-593-2411</a>					
Study Area Code of Reporting Carrier:	<a href="#">170205</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [ARMSTRONG TEL. CO. OF MD](#)

Signature of authorized officer or employee: [David Ames](#)

Digitally signed by David Ames DN:cn=David  
Ames,email=dames@agoc.com,O=armstrong tel. co. of md,l=Butler  
PA 16002, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [David Ames](#)

Title or position of authorized officer or employee: [Regulatory Analyst](#)

Telephone number of authorized officer or employee: [724-283-0925](#)

Study Area Code of  
Reporting Carrier:

[180216](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [EMPOWER TELECOM, INC.](#)

Signature of authorized officer or employee: [Carolyn Piercy](#)

Digitally signed by Carolyn Piercy DN:cn=Carolyn Piercy,email=cpiercy@meckelec.org,O=empower telecom,inc.,l=Bracey VA 23919, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Carolyn Piercy](#)

Title or position of authorized officer or employee: [Accountant](#)

Telephone number of authorized officer or employee: [434-636-2274](#)

Study Area Code of  
Reporting Carrier:

[190219](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BURKE'S GARDEN TEL. CO., INC.](#)

Signature of authorized officer or employee: [Missy Lynch](#)

Digitally signed by Missy Lynch DN:cn=Missy Lynch,email=missylynch@bgtco.net,O=burke's garden tel. co.,inc.,l=Tazewell VA 24651, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Missy Lynch](#)

Title or position of authorized officer or employee: [Office Manager/Secretary](#)

Telephone number of authorized officer or employee: [276-472-2345](#)

Study Area Code of  
Reporting Carrier:

[190220](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [NEW HOPE TELEPHONE COOPERATIVE](#)

Signature of authorized officer or employee: [Laurie Hensley](#)

Digitally signed by Laurie Hensley DN:cn=Laurie Hensley,email=lauriehensley@newhopetel.com,O=new hope telephone cooperative,|Fort Defiance VA 24437, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Laurie Hensley](#)

Title or position of authorized officer or employee: [Secretary-Treasurer](#)

Telephone number of authorized officer or employee: [540-363-6277](#)

Study Area Code of  
Reporting Carrier:

[190239](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [SHENANDOAH TEL. CO.](#)Signature of authorized officer or employee: [Gary Miller](#)Digitally signed by Gary Miller DN:cn=Gary  
Miller,email=Gary.Miller@emp.shentel.com,O=shenandoah tel.  
co.,l=Edinburg VA 22824, Date:3/24/2021Date: [3/24/2021](#).Printed name of authorized officer or employee: [Gary Miller](#)Title or position of authorized officer or employee: [Director, Accounting WLN & WLS](#)Telephone number of authorized officer or employee: [540-984-5991](#)Study Area Code of  
Reporting Carrier:[190250](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [SHENANDOAH TELEPHONE COMPANY - NR](#)Signature of authorized officer or employee: [Gary Miller](#)Digitally signed by Gary Miller DN:cn=Gary  
Miller,email=Gary.Miller@emp.shentel.com,O=shenandoah telephone  
company - nr,l=Edinburg VA 22824, Date:3/24/2021Date: [3/24/2021](#).Printed name of authorized officer or employee: [Gary Miller](#)Title or position of authorized officer or employee: [Director, Accounting WLN & WLS](#)Telephone number of authorized officer or employee: [540-984-5991](#)Study Area Code of  
Reporting Carrier:[197251](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">ITS TELECOMMUNICATIONS SYSTEMS, INC.</a>					
Signature of authorized officer or employee: <a href="#">Bruce Russell</a>				Digitally signed by Bruce Russell DN:cn=Bruce Russell,email=brucer@itsfiber.com,O=its telecommunications systems, inc.,l=Indiantown FL 34956, Date:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Bruce Russell</a>					
Title or position of authorized officer or employee: <a href="#">Vice President/CFO</a>					
Telephone number of authorized officer or employee: <a href="#">772-597-2106</a>					
Study Area Code of Reporting Carrier:	<a href="#">210331</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">BRANTLEY TEL. CO., INC.</a>					
Signature of authorized officer or employee: <a href="#">Andrea Mathie</a>				Digitally signed by Andrea Mathie DN:cn=Andrea Mathie,email=andrea.mathie@btctelcom.net,O=brantley tel. co.,inc.,l=Nahunta GA 31553, Date:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Andrea Mathie</a>					
Title or position of authorized officer or employee: <a href="#">Regulatory Supervisor</a>					
Telephone number of authorized officer or employee: <a href="#">912-462-3126</a>					
Study Area Code of Reporting Carrier:	<a href="#">220347</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BULLOCH CNTY. RURAL TEL. COOP., INC.](#)

Signature of authorized officer or employee: **John D. Scott**

Digitally signed by John D. Scott DN: cn=John D. Scott, email=johnscott@bulloch.net, O=bulloch cnty. rural tel. coop., inc., l=Statesboro GA 30458, Date: 3/21/2021

Date: **3/21/2021.**

Printed name of authorized officer or employee: **John D. Scott**

Title or position of authorized officer or employee: [General Manager/COO](#)

Telephone number of authorized officer or employee: **912-865-1100**

Study Area Code of  
Reporting Carrier:

**220348**

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

**03/31/2021**

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [DARIEN TEL. CO., INC.](#)

Signature of authorized officer or employee: [Kenneth I. Johnson](#)

Digitally signed by Kenneth I. Johnson DN:cn=Kenneth I. Johnson,email=kenj@darientel.net,O=darien tel. co., inc.,l=Darien GA 31305, Date:3/24/2021

Date: [3/24/2021](#).

Printed name of authorized officer or employee: [Kenneth I. Johnson](#)

Title or position of authorized officer or employee: [Regulatory Manager](#)

Telephone number of authorized officer or employee: [912-437-6615](#)

Study Area Code of  
Reporting Carrier:

[220358](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">ELLIJAY TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Darrell Harper</a>				<small>Digitally signed by Darrell Harper DN:cn=Darrell Harper,email=darrellh@ellijay.com,O=ellijay tel. co.,l=Ellijay GA 30540, Date:3/24/2021</small>	
Date: <a href="#">3/24/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Darrell Harper</a>					
Title or position of authorized officer or employee: <a href="#">Vice President</a>					
Telephone number of authorized officer or employee: <a href="#">706-697-5519</a>					
Study Area Code of Reporting Carrier:	<a href="#">220360</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GLENWOOD TEL. CO.](#)

Signature of authorized officer or employee: [Janice E. O'Brien](#)

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:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Janice E. O'Brien](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [912-523-5111](#)

Study Area Code of  
Reporting Carrier:

[220365](#)

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

[03/31/2021](#)

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

**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>Hart Telephone Company</b>			
Signature of authorized officer or employee <i>Melissa F. Green</i>			Date <b>03/24/2021</b>
Printed name of authorized officer or employee <b>Melissa F. Green</b>			
Title or position of authorized officer or employee <b>CFO</b>			
Telephone number of authorized officer or employee: ( 706 ) 376 - 4701 , ext. 2238			
Study Area Code of Reporting Carrier	220368	Filing Due Date for this form (mm/dd/yyyy)	3/31/2021
<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**

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [PEMBROKE TEL. CO., INC.](#)

Signature of authorized officer or employee: [Beverly Pirkle](#)

Digitally signed by Beverly Pirkle DN:cn=Beverly Pirkle,email=beverly.pirkle@pacfiber.com,O=pembroke tel. co.,inc.,l=Pembroke GA 31321, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Beverly Pirkle](#)

Title or position of authorized officer or employee: [Manager of Regulatory Affairs](#)

Telephone number of authorized officer or employee: [912-653-4389](#)

Study Area Code of  
Reporting Carrier:

[220376](#)

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

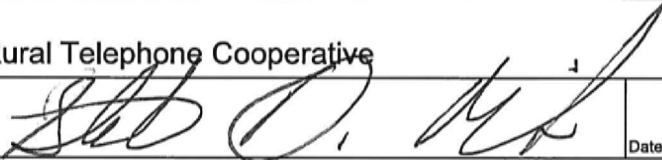
[03/31/2021](#)

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

**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>Planters Rural Telephone Cooperative</b>			
Signature of authorized officer or employee 			Date <b>3-12-2021</b>
Printed name of authorized officer or employee <b>Stephen D. Milner</b>			
Title or position of authorized officer or employee <b>CEO/General Manager</b>			
Telephone number of authorized officer or employee: ( <b>912</b> ) <b>857</b> - <b>4411</b> , ext.			
Study Area Code of Reporting Carrier	<b>220378</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2021</b>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

Certification-Agent

TRANSMITTAL NO. 1635

**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>Public Service Telephone Company</b>			
Signature of authorized officer or employee 			Date <b>03/25/2021</b>
Printed name of authorized officer or employee <b>James L. Bond</b>			
Title or position of authorized officer or employee <b>President</b>			
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)	3/31/2021
<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**

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [RINGGOLD TEL. CO.](#)

Signature of authorized officer or employee: [Andy LeGrande](#)

Digitally signed by Andy LeGrande DN:cn=Andy  
LeGrande, email=alegrande@rtctel.com,O=ringgold tel. co.,l=Ringgold  
GA 30736, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Andy LeGrande](#)

Title or position of authorized officer or employee: [Regulatory Business Development Analyst](#)

Telephone number of authorized officer or employee: [706-965-1719](#)

Study Area Code of  
Reporting Carrier:

[220382](#)

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

[03/31/2021](#)

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

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, Inc</u>			
Signature of authorized officer or employee <u>Steven W. Tatum</u>			Date <u>03/26/2021</u>
Printed name of authorized officer or employee <u>Steven W. Tatum</u>			
Title or position of authorized officer or employee <u>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>3/31/2021</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**

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [WAVERLY HALL TELEPHONE, L.L.C.](#)

Signature of authorized officer or employee: [Deborah Rand](#)

Digitally signed by Deborah Rand DN:cn=Deborah Rand,email=drand@usch.com,O=waverly hall telephone, l.l.c.,l=Livingston TX 77351, Date:3/18/2021

Date: [3/18/2021](#).

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](#)

Study Area Code of  
Reporting Carrier:

[220392](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">ATLANTIC TEL. MEMB. CORP.</a>					
Signature of authorized officer or employee: <a href="#">Laura Graff</a>				Digitally signed by Laura Graff DN:cn=Laura Graff,email=lgraff@atmc.com,O=atlantic tel. memb. corp.,l=Shallotte NC 28459, Date:3/17/2021	
Date: <a href="#">3/17/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Laura Graff</a>					
Title or position of authorized officer or employee: <a href="#">Director of Regulatory and Finance</a>					
Telephone number of authorized officer or employee: <a href="#">910-755-1782</a>					
Study Area Code of Reporting Carrier:	<a href="#">230468</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BARNARDSVILLE TEL. dba RIVERSTREET NETWORKS](#)

Signature of authorized officer or employee: [Eric Cramer](#)

Digitally signed by Eric Cramer DN:cn=Eric Cramer,email=ericcramer@wilkestmc.net,O=barnardsville tel. dba riverstreet networks,l=Wilkesboro NC 28697-2108, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Eric Cramer](#)

Title or position of authorized officer or employee: [CEO and General Manager](#)

Telephone number of authorized officer or employee: [336-973-6112](#)

Study Area Code of  
Reporting Carrier:

[230469](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">CITIZENS TEL. CO.-NC</a>					
Signature of authorized officer or employee: <a href="#">Tara Thomas</a>				Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=citizens tel. co.-nc,l=Rock Hill SC 29730, Date:3/18/2021	
Date: <a href="#">3/18/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Tara Thomas</a>					
Title or position of authorized officer or employee: <a href="#">Associate Regulatory Analyst</a>					
Telephone number of authorized officer or employee: <a href="#">803-326-6501</a>					
Study Area Code of Reporting Carrier:	<a href="#">230473</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [ELLERBE TEL. CO. dba RIVERSTREET NETWORKS](#)

Signature of authorized officer or employee: [Eric Cramer](#)

Digitally signed by Eric Cramer DN:cn=Eric  
Cramer,email=ericcramer@wilkestmc.net,O=ellerbe tel. co. dba  
riverstreet networks,l=Wilkesboro NC 28697-2108, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Eric Cramer](#)

Title or position of authorized officer or employee: [CEO and General Manager](#)

Telephone number of authorized officer or employee: [336-973-6112](#)

Study Area Code of  
Reporting Carrier:

[230478](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">RANDOLPH TEL. MEMB. CORP. DBA RANDOLPH COMM.</a>					
Signature of authorized officer or employee: <a href="#">Brenda Hardee</a>				Digitally signed by Brenda Hardee DN:cn=Brenda Hardee,email=bhardee@rtmc.coop,O=randolph tel. memb. corp. dba randolph comm.,l=Asheboro NC 27203, Date:3/16/2021	
Date: <a href="#">3/16/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Brenda Hardee</a>					
Title or position of authorized officer or employee: <a href="#">Revenue Assurance Specialist</a>					
Telephone number of authorized officer or employee: <a href="#">336-879-7946</a>					
Study Area Code of Reporting Carrier:	<a href="#">230496</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [SURRY TELEPHONE MEMBERSHIP CORPORATION](#)Signature of authorized officer or employee: [Amy Hanson](#)

Digitally signed by Amy Hanson DN:cn=Amy Hanson, email=hansona@surrytel.com, O=surry telephone membership corporation, l=Dobson NC 27017, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Amy Hanson](#)Title or position of authorized officer or employee: [Chief Operating Officer](#)Telephone number of authorized officer or employee: [336-374-5021](#)Study Area Code of  
Reporting Carrier:[230497](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SALUDA MOUNTAIN TEL. dba RIVERSTREET NETWORKS](#)

Signature of authorized officer or employee: [Eric Cramer](#)

Digitally signed by Eric Cramer DN:cn=Eric Cramer,email=ericcramer@wilkestmc.net,O=saluda mountain tel. dba riverstreet networks,l=Wilkesboro NC 28697-2108, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Eric Cramer](#)

Title or position of authorized officer or employee: [CEO and General Manager](#)

Telephone number of authorized officer or employee: [336-973-6112](#)

Study Area Code of  
Reporting Carrier:

[230498](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [SERVICE TEL. CO. dba RIVERSTREET NETWORKS](#)Signature of authorized officer or employee: [Eric Cramer](#)Digitally signed by Eric Cramer DN:cn=Eric  
Cramer,email=ericcramer@wilkestmc.net,O=service tel. co. dba  
riverstreet networks,l=Wilkesboro NC 28697-2108, Date:3/22/2021Date: [3/22/2021](#).Printed name of authorized officer or employee: [Eric Cramer](#)Title or position of authorized officer or employee: [CEO and General Manager](#)Telephone number of authorized officer or employee: [336-973-6112](#)Study Area Code of  
Reporting Carrier:[230500](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SKYLINE TEL. MEMB. CORP.](#)

Signature of authorized officer or employee: [Laura Shepherd](#)

Digitally signed by Laura Shepherd DN:cn=Laura Shepherd,email=laura.shepherd@skyline.org,O=skyline tel. memb. corp.,l=West Jefferson NC 28694-0729, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Laura Shepherd](#)

Title or position of authorized officer or employee: [CFO](#)

Telephone number of authorized officer or employee: [336-876-6382](#)

Study Area Code of  
Reporting Carrier:

[230501](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [STAR TEL. MEMB. CORP.](#)

Signature of authorized officer or employee: [Jeff Nethercutt](#)

Digitally signed by Jeff Nethercutt DN:cn=Jeff Nethercutt,email=jnethercutt@stmc.net,O=star tel. memb. corp.,l=Clinton NC 28328, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Jeff Nethercutt](#)

Title or position of authorized officer or employee: [Executive Vice President and Gen Manager](#)

Telephone number of authorized officer or employee: [910-564-7869](#)

Study Area Code of  
Reporting Carrier:

[230502](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SURRY TELEPHONE MEMBERSHIP CORPORATION](#)

Signature of authorized officer or employee: [Amy Hanson](#)

Digitally signed by Amy Hanson DN:cn=Amy Hanson,email=hansona@surrytel.com,O=surry telephone membership corporation,l=Dobson NC 27017, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Amy Hanson](#)

Title or position of authorized officer or employee: [Chief Operating Officer](#)

Telephone number of authorized officer or employee: [336-374-5021](#)

Study Area Code of  
Reporting Carrier:

[230503](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WILKES TEL MEMB CORP dba RIVERSTREET NETWORKS](#)Signature of authorized officer or employee: [Eric Cramer](#)

Digitally signed by Eric Cramer DN:cn=Eric Cramer,email=ericcramer@wilkestmc.net,O=wilkes tel memb corp dba riverstreet networks,l=Wilkesboro NC 28697-2108, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Eric Cramer](#)Title or position of authorized officer or employee: [CEO and General Manager](#)Telephone number of authorized officer or employee: [336-973-6112](#)Study Area Code of  
Reporting Carrier:[230505](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WILKES TEL MEMB CORP dba RIVERSTREET NETWORKS](#)Signature of authorized officer or employee: [Eric Cramer](#)

Digitally signed by Eric Cramer DN:cn=Eric Cramer,email=ericcramer@wilkestmc.net,O=wilkes tel memb corp dba riverstreet networks,l=Wilkesboro NC 28697-2108, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Eric Cramer](#)Title or position of authorized officer or employee: [CEO and General Manager](#)Telephone number of authorized officer or employee: [336-973-6112](#)Study Area Code of  
Reporting Carrier:[230510](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [YADKIN VALLEY TEL. MEMB. CORP.](#)

Signature of authorized officer or employee: [Butch Mabry](#)

Digitally signed by Butch Mabry DN:cn=Butch Mabry,email=Butch.mabry@yadtel.com,O=yadkin valley tel. memb. corp.,l=Yadkinville NC 27055, Date:3/24/2021

Date: [3/24/2021](#).

Printed name of authorized officer or employee: [Butch Mabry](#)

Title or position of authorized officer or employee: [Risk & Compliance Manager](#)

Telephone number of authorized officer or employee: [336-463-5050](#)

Study Area Code of  
Reporting Carrier:

[230511](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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

*Butch Mabry*

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**

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BLUFFTON TEL. CO., INC.](#)

Signature of authorized officer or employee: [Trey Judy](#)

Digitally signed by Trey Judy DN:cn=Trey  
Judy,email=trey.judy@htc.hargray.com,O=bluffton tel. co.,  
inc.,l=Hilton Head SC 29928, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Trey Judy](#)

Title or position of authorized officer or employee: [Director Regulatory & Carrier Relation](#)

Telephone number of authorized officer or employee: [843-686-1210](#)

Study Area Code of  
Reporting Carrier:

[240512](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">CHESNEE TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Laura Shepherd</a>				Digitally signed by Laura Shepherd DN:cn=Laura Shepherd,email=laura.shepherd@skyline.org,O=chesnee tel. co.,l=West Jefferson NC 28694-0729, Date:3/25/2021	
Date: <a href="#">3/25/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Laura Shepherd</a>					
Title or position of authorized officer or employee: <a href="#">CFO</a>					
Telephone number of authorized officer or employee: <a href="#">336-876-6382</a>					
Study Area Code of Reporting Carrier:	<a href="#">240515</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">CHESTER TEL. CO.-SC</a>					
Signature of authorized officer or employee: <a href="#">Eric Ramey</a>				<small>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:3/23/2021</small>	
Date: <a href="#">3/23/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Eric Ramey</a>					
Title or position of authorized officer or employee: <a href="#">Vice President -Regulatory &amp; Admin</a>					
Telephone number of authorized officer or employee: <a href="#">803-581-9152</a>					
Study Area Code of Reporting Carrier:	<a href="#">240516</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [FARMERS TEL. COOP., INC-SC](#)

Signature of authorized officer or employee: [Sandra Moore](#)

Digitally signed by Sandra Moore DN:cn=Sandra Moore,email=moores@mail.fcc.org,O=farmers tel. coop., inc-sc,lc=Kingstree SC 29556, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Sandra Moore](#)

Title or position of authorized officer or employee: [External Affairs and Regulatory Analyst](#)

Telephone number of authorized officer or employee: [843-382-1313](#)

Study Area Code of  
Reporting Carrier:

[240520](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [FORT MILL TEL. CO.](#)

Signature of authorized officer or employee: [Tara Thomas](#)

Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=fort mill tel. co.,l=Rock Hill SC 29730, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Tara Thomas](#)

Title or position of authorized officer or employee: [Associate Regulatory Analyst](#)

Telephone number of authorized officer or employee: [803-326-6501](#)

Study Area Code of  
Reporting Carrier:

[240521](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [HARGRAY TEL. CO., INC.](#)

Signature of authorized officer or employee: [Trey Judy](#)

Digitally signed by Trey Judy DN:cn=Trey  
Judy,email=trey.judy@htc.hargray.com,O=hargray tel. co.,  
inc.,l=Hilton Head SC 29928, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Trey Judy](#)

Title or position of authorized officer or employee: [Director Regulatory & Carrier Relation](#)

Telephone number of authorized officer or employee: [843-686-1210](#)

Study Area Code of  
Reporting Carrier:

[240523](#)

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

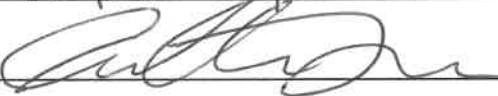
[03/31/2021](#)

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

**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>Horry Telephone Cooperative, Inc.</u>			
Signature of authorized officer or employee 			Date <u>3/26/2021</u>
Printed name of authorized officer or employee <u>Carlton Lewis</u>			
Title or position of authorized officer or employee <u>CFO</u>			
Telephone number of authorized officer or employee: <u>(843) 365 - 2151</u> , ext.			
Study Area Code of Reporting Carrier <u>240528</u>	Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2021</u>		
<p align="center"><b>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</b></p>			

Certification-Agent

**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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LANCASTER TEL. CO.](#)

Signature of authorized officer or employee: [Tara Thomas](#)

Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=lancaster tel. co.,l=Rock Hill SC 29730, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Tara Thomas](#)

Title or position of authorized officer or employee: [Associate Regulatory Analyst](#)

Telephone number of authorized officer or employee: [803-326-6501](#)

Study Area Code of  
Reporting Carrier:

[240531](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">LOCKHART TEL. CO., INC.</a>					
Signature of authorized officer or employee: <a href="#">Eric Ramey</a>					<small>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:3/23/2021</small>
Date: <a href="#">3/23/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Eric Ramey</a>					
Title or position of authorized officer or employee: <a href="#">Vice President -Regulatory &amp; Admin</a>					
Telephone number of authorized officer or employee: <a href="#">803-581-9152</a>					
Study Area Code of Reporting Carrier:	<a href="#">240532</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [PALMETTO RURAL TEL. COOP., INC.](#)

Signature of authorized officer or employee: [Jason J. Dandridge](#)

Digitally signed by Jason J. Dandridge DN:cn=Jason J. Dandridge,email=jason.dandridge@prtc.us,O=palmetto rural tel. coop., inc.,l=Walterboro SC 29488, Date:3/24/2021

Date: [3/24/2021](#).

Printed name of authorized officer or employee: [Jason J. Dandridge](#)

Title or position of authorized officer or employee: [CEO](#)

Telephone number of authorized officer or employee: [843-538-9090](#)

Study Area Code of  
Reporting Carrier:

[240536](#)

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

[03/31/2021](#)

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

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>3/22/21</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: ( <u>864</u> ) <u>682</u> - <u>3131</u> , ext.			
Study Area Code of Reporting Carrier	<u>240538</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2021</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**

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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">PBT TELECOM, INC.</a>					
Signature of authorized officer or employee: <a href="#">Tara Thomas</a>				Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=pbt telecom,inc.,l=Rock Hill SC 29730, Date:3/18/2021	
Date: <a href="#">3/18/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Tara Thomas</a>					
Title or position of authorized officer or employee: <a href="#">Associate Regulatory Analyst</a>					
Telephone number of authorized officer or employee: <a href="#">803-326-6501</a>					
Study Area Code of Reporting Carrier:	<a href="#">240539</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [RIDGEWAY TEL. CO., INC.](#)Signature of authorized officer or employee: [Eric Ramey](#)Digitally signed by Eric Ramey DN:cn=Eric  
Ramey,email=eric.Ramey@truvista.biz,O=ridgeway tel. co.,  
inc.,l=Chester SC 29706-0160, Date:3/23/2021Date: [3/23/2021](#).Printed name of authorized officer or employee: [Eric Ramey](#)Title or position of authorized officer or employee: [Vice President -Regulatory & Admin](#)Telephone number of authorized officer or employee: [803-581-9152](#)Study Area Code of  
Reporting Carrier:[240541](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [COMPORIUM, INC.](#)

Signature of authorized officer or employee: [Tara Thomas](#)

Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=comporium,inc.,l=Rock Hill SC 29730, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Tara Thomas](#)

Title or position of authorized officer or employee: [Associate Regulatory Analyst](#)

Telephone number of authorized officer or employee: [803-326-6501](#)

Study Area Code of  
Reporting Carrier:

[240542](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">SANDHILL TEL. COOP., INC.</a>					
Signature of authorized officer or employee: <a href="#">Allen Mills</a>				Digitally signed by Allen Mills DN:cn=Allen Mills,email=allen.mills@mysandhill.net,O=sandhill tel. coop.,inc.,l=Jefferson SC 29718, Date:3/18/2021	
Date: <a href="#">3/18/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Allen Mills</a>					
Title or position of authorized officer or employee: <a href="#">CABS Coordinator</a>					
Telephone number of authorized officer or employee: <a href="#">843-658-6848</a>					
Study Area Code of Reporting Carrier:	<a href="#">240546</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

2-2

FCC Form 508  
OMB Control No. 3060-0986FCC 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>			
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>Castleberry Telephone Co., Inc</u>			
Signature of authorized officer or employee <u>Homer Holland</u>			Date <u>3-22-21</u>
Printed name of authorized officer or employee <u>Homer Holland</u>			
Title or position of authorized officer or employee <u>Sec / Treas</u>			
Telephone number of authorized officer or employee: ( ) - , ext. <u>(251) 966-2115</u>			
Study Area Code of Reporting Carrier	<u>250285</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2021</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

Certification-Agent

## FCC Form 508

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

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [FARMERS TELECOMMUNICATIONS COOPERATIVE, INC.](#)Signature of authorized officer or employee: [Paul Higdon](#)

Digitally signed by Paul Higdon DN:cn=Paul Higdon,email=phigdon@staff.farmerstel.com,O=farmers telecommunications cooperative, inc.,l=Rainsville AL 35986-0217, Date:3/23/2021

Date: [3/23/2021](#).Printed name of authorized officer or employee: [Paul Higdon](#)Title or position of authorized officer or employee: [Settlements Accountant](#)Telephone number of authorized officer or employee: [256-638-2144](#)Study Area Code of  
Reporting Carrier:[250290](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [HAYNEVILLE TEL. CO., INC.](#)

Signature of authorized officer or employee: [Evelyn Causey](#)

Digitally signed by Evelyn Causey DN:cn=Evelyn Causey,email=ecauser@htcnet.net,O=hayneville tel. co.,inc.,l=Hayneville AL 36040, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Evelyn Causey](#)

Title or position of authorized officer or employee: [President/COO](#)

Telephone number of authorized officer or employee: [334-548-2101](#)

Study Area Code of  
Reporting Carrier:

[250299](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">MON-CRE TEL. COOP. INC.</a>					
Signature of authorized officer or employee: <a href="#">Teresa Rich</a>				<small>Digitally signed by Teresa Rich DN:cn=Teresa Rich,email=teresa@mon-cre.net,O=mon-cre tel. coop. inc.,l=Ramer AL 36069, Date:3/23/2021</small>	
Date: <a href="#">3/23/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Teresa Rich</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">334-562-3242</a>					
Study Area Code of Reporting Carrier:	<a href="#">250305</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MOUNDVILLE TEL. CO.](#)

Signature of authorized officer or employee: [R. Scott Taylor](#)

Digitally signed by R. Scott Taylor DN:cn=R. Scott Taylor,email=scott@mound.net,O=moundville tel. co.,l=Moundville AL 35474, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [R. Scott Taylor](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [205-371-9011](#)

Study Area Code of  
Reporting Carrier:

[250307](#)

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

[03/31/2021](#)

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

**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>New Hope Telephone Cooperative, Inc.</u>			
Signature of authorized officer or employee 			Date <u>3-23-21</u>
Printed name of authorized officer or employee <u>Daniel Martin</u>			
Title or position of authorized officer or employee <u>General Manager</u>			
Telephone number of authorized officer or employee: ( <u>256</u> ) <u>723</u> - <u>4211</u> , ext.			
Study Area Code of Reporting Carrier	<u>250308</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2021</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [PINE BELT TEL. CO.](#)

Signature of authorized officer or employee: [John C. Nettles](#)

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:3/26/2021

Date: [3/26/2021](#).

Printed name of authorized officer or employee: [John C. Nettles](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [334-385-2106](#)

Study Area Code of  
Reporting Carrier:

[250315](#)

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

[03/31/2021](#)

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

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

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

Name of Reporting Carrier **Pine Belt Telephone Company, Inc.**

Signature of authorized officer or employee  Date **08/04/2021**

Printed name of authorized officer or employee **John C. Nettles**

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

Telephone number of authorized officer or employee: ( **334** ) **385** - **5001** , ext.

Study Area Code of Reporting Carrier	<b>250315</b>		Filing Due Date for this form (mm/dd/yyyy)	August 2021	
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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**

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [RAGLAND TEL. CO.](#)

Signature of authorized officer or employee: [Matthew Jackson](#)

Digitally signed by Matthew Jackson DN:cn=Matthew Jackson,email=mattjackson@ragland.net,O=ragland tel. co.,l=Ragland AL 35131, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Matthew Jackson](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [205-472-2141](#)

Study Area Code of  
Reporting Carrier:

[250316](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">BALLARD RURAL TEL. COOP. CORP., INC.</a>					
Signature of authorized officer or employee: <a href="#">Stephen P. Jones II</a>				Digitally signed by Stephen P. Jones II DN:cn=Stephen P. Jones II,email=stephen.jones@btc.coop,O=ballard rural tel. coop. corp.,inc.,I=La Center KY 42056-0209, Date:3/25/2021	
Date: <a href="#">3/25/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Stephen P. Jones II</a>					
Title or position of authorized officer or employee: <a href="#">Information Technology Network Manager</a>					
Telephone number of authorized officer or employee: <a href="#">270-665-5186</a>					
Study Area Code of Reporting Carrier:	<a href="#">260396</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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>Brandenburg Telephone Company, Inc.</u>				
Signature of authorized officer or employee: 				Date: <u>03/19/2021</u>
Printed name of authorized officer or employee: <u>Randall Bradley</u>				
Title or position of authorized officer or employee: <u>Controller</u>				
Telephone number of authorized officer or employee: ( <u>270</u> ) <u>422</u> - <u>2121</u> , ext. <u>        </u>				
Study Area Code of Reporting Carrier: <u>260398</u>		Filing Due Date for this form (mm/dd/yyyy): <u>3/31/2021</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 **Brandenburg Telephone Company, Inc.**

Signature of authorized officer or employee

*Randall Bradley*

Date

**04/21/2021**

Printed name of authorized officer or employee

**Randall Bradley**

Title or position of authorized officer or employee

**Controller**

Telephone number of authorized officer or employee: ( 270 ) 422 - 2121 , ext.

Study Area Code of Reporting Carrier

**260398**

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

**June 2021**

**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**

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [DUO COUNTY TEL. COOP., INC.](#)

Signature of authorized officer or employee: [Daryl L. Hammond](#)

Digitally signed by Daryl L. Hammond DN:cn=Daryl L. Hammond,email=dhammond@duotel.com,O=duo county tel. coop.,inc.,l=Jamestown KY 42629, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Daryl L. Hammond](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [270-343-3131](#)

Study Area Code of  
Reporting Carrier:

[260401](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [FOOTHILLS RURAL TEL. COOP. CORP., INC.](#)Signature of authorized officer or employee: [Ruth Conley](#)

Digitally signed by Ruth Conley DN:cn=Ruth Conley,email=ruthc@foothills.coop,O=foothills rural tel. coop. corp.,inc.,l=Staffordville KY 41256, Date:3/24/2021

Date: [3/24/2021](#).Printed name of authorized officer or employee: [Ruth Conley](#)Title or position of authorized officer or employee: [Chief Executive Officer](#)Telephone number of authorized officer or employee: [606-297-9131](#)Study Area Code of  
Reporting Carrier:[260406](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">GEARHEART COMM. DBA COALFIELDS TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Elizabeth Howell</a>				<small>Digitally signed by Elizabeth Howell DN:cn=Elizabeth Howell,email=ehowell@gearheart.com,O=gearheart comm. dba coalfields tel. co.,l= , Date:3/16/2021</small>	
Date: <a href="#">3/16/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Elizabeth Howell</a>					
Title or position of authorized officer or employee: <a href="#">Admin Asst.</a>					
Telephone number of authorized officer or employee: <a href="#">606-479-6253</a>					
Study Area Code of Reporting Carrier:	<a href="#">260408</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [LOGAN TEL. COOP., INC.](#)Signature of authorized officer or employee: [Gregory A. Hale](#)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:3/17/2021Date: [3/17/2021](#).Printed name of authorized officer or employee: [Gregory A. Hale](#)Title or position of authorized officer or employee: [General Manager/Executive V.P.](#)Telephone number of authorized officer or employee: [270-542-4121](#)Study Area Code of  
Reporting Carrier:[260413](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MOUNTAIN RURAL TEL. COOP. CORP., INC.](#)Signature of authorized officer or employee: [Angela Pennington](#)

Digitally signed by Angela Pennington DN:cn=Angela Pennington,email=apennington@mountaintelephone.com,O=mountain rural tel. coop. corp., inc.,l=West Liberty KY 41472, Date:3/19/2021

Date: [3/19/2021](#).Printed name of authorized officer or employee: [Angela Pennington](#)Title or position of authorized officer or employee: [Business Office Manager](#)Telephone number of authorized officer or employee: [606-743-3121](#)Study Area Code of  
Reporting Carrier:[260414](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">PEOPLES RURAL TEL. COOP. CORP.</a>					
Signature of authorized officer or employee: <a href="#">Christine Duncan</a>				Digitally signed by Christine Duncan DN:cn=Christine Duncan,email=Christine.duncan@prtc.org,O=peoples rural tel. coop.,l=McKee KY 40447, Date:3/19/2021	
Date: <a href="#">3/19/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Christine Duncan</a>					
Title or position of authorized officer or employee: <a href="#">Chief Financial Officer</a>					
Telephone number of authorized officer or employee: <a href="#">606-287-5485</a>					
Study Area Code of Reporting Carrier:	<a href="#">260415</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">SOUTH CENTRAL RURAL TELECOMM. COOP., INC.</a>					
Signature of authorized officer or employee: <a href="#">Chris Lawrence</a>				Digitally signed by Chris Lawrence DN:cn=Chris Lawrence,email=chris.lawrence@scrtc.net,O=south central rural telecomm. coop., inc.,l=Glasgow KY 42141, Date:3/15/2021	
Date: <a href="#">3/15/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Chris Lawrence</a>					
Title or position of authorized officer or employee: <a href="#">Business Director</a>					
Telephone number of authorized officer or employee: <a href="#">270-678-8230</a>					
Study Area Code of Reporting Carrier:	<a href="#">260418</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">THACKER/GRIGSBY TEL. CO., INC.</a>					
Signature of authorized officer or employee: <a href="#">William K. Grigsby</a>				Digitally signed by William K. Grigsby DN:cn=William K. Grigsby,email=b.grigsby@tgtel.com,O=thacker/grigsby tel. co.,inc.,l=Hindman KY 41822, Date:3/24/2021	
Date: <a href="#">3/24/2021.</a>					
Printed name of authorized officer or employee: <a href="#">William K. Grigsby</a>					
Title or position of authorized officer or employee: <a href="#">President/General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">606-785-9500</a>					
Study Area Code of Reporting Carrier:	<a href="#">260419</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WEST KY. RURAL TEL. COOP. CORP., INC.](#)Signature of authorized officer or employee: [Tiffany Myers](#)

Digitally signed by Tiffany Myers DN:cn=Tiffany Myers,email=tmyers@mywkt.coop,O=west ky. rural tel. coop. corp.,inc.,l=Mayfield KY 42066, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Tiffany Myers](#)Title or position of authorized officer or employee: [Chief Financial Officer](#)Telephone number of authorized officer or employee: [270-804-4110](#)Study Area Code of  
Reporting Carrier:[260421](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [DELCAMBRE TEL. CO.](#)

Signature of authorized officer or employee: [Marcy Landry](#)

Digitally signed by Marcy Landry DN:cn=Marcy Landry,email=mlandry@delcambre.net,O=delcambre tel. co.,l=Delcambre LA 70528, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Marcy Landry](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [337-685-2311](#)

Study Area Code of  
Reporting Carrier:

[270428](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [KAPLAN TEL. CO.](#)

Signature of authorized officer or employee: [Richard J. Constantin](#)

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:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Richard J. Constantin](#)

Title or position of authorized officer or employee: [Regulatory Manager](#)

Telephone number of authorized officer or employee: [337-643-4242](#)

Study Area Code of  
Reporting Carrier:

[270432](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">NORTHEAST LOUISIANA TEL. CO., INC.</a>					
Signature of authorized officer or employee: <a href="#">Mike George</a>				Digitally signed by Mike George DN:cn=Mike George,email=mgeorge@ne-tel.com,O=northeast louisiana tel. co.,inc.,l=Collinston LA 71229, Date:3/26/2021	
Date: <a href="#">3/26/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Mike George</a>					
Title or position of authorized officer or employee: <a href="#">President / General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">318-874-7011</a>					
Study Area Code of Reporting Carrier:	<a href="#">270435</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [RESERVE TEL. CO.](#)

Signature of authorized officer or employee: [Annette Faircloth](#)

Digitally signed by Annette Faircloth DN:cn=Annette Faircloth,email=afaircloth@reservetele.com,O=reserve tel. co.,l=Reserve LA 70084, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Annette Faircloth](#)

Title or position of authorized officer or employee: [V.P of Finance](#)

Telephone number of authorized officer or employee: [985-536-1271](#)

Study Area Code of  
Reporting Carrier:

[270438](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">STAR TEL. CO., INC.</a>					
Signature of authorized officer or employee: <a href="#">Jeremy Smith</a>				Digitally signed by Jeremy Smith DN:cn=Jeremy Smith,email=jerry@directcom.com,O=star tel. co., inc.,l=Rockland ID 83271, Date:3/15/2021	
Date: <a href="#">3/15/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Jeremy Smith</a>					
Title or position of authorized officer or employee: <a href="#">President</a>					
Telephone number of authorized officer or employee: <a href="#">208-548-2345</a>					
Study Area Code of Reporting Carrier:	<a href="#">270441</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**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>03/11/2021</u>
Printed name of authorized officer or employee <u>Charlotte Pearce</u>			
Title or position of authorized officer or employee <u>Vice President</u>			
Telephone number of authorized officer or employee: ( <u>601</u> ) <u>764</u> - <u>3171</u> , ext.			
Study Area Code of Reporting Carrier	<u>280461</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2021</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-Agent

TRANSMITTAL NO. 1635

**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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SLEDGE TEL. CO., INC.](#)

Signature of authorized officer or employee: [Robert O. Sledge Jr.](#)

Digitally signed by Robert O. Sledge Jr. DN:cn=Robert O. Sledge Jr.,email=rsledge@deltaland.net,O=sledge tel. co., inc.,l=Sunflower MS 38778-0068, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Robert O. Sledge Jr.](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [662-569-3311](#)

Study Area Code of  
Reporting Carrier:

[280466](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [ARDMORE TEL. CO., INC.](#)

Signature of authorized officer or employee: [Tiffany Myers](#)

Digitally signed by Tiffany Myers DN:cn=Tiffany Myers,email=tmyers@mywkt.coop,O=ardmore tel. co., inc.,l=Mayfield KY 42066, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Tiffany Myers](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [270-804-4110](#)

Study Area Code of  
Reporting Carrier:

[290280](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the 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>			
<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>03/25/2021</b>
Printed name of authorized officer or employee <b>Greg Smartt</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>3/31/2021</b>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

Certification-Agent

TRANSMITTAL NO. 1635

**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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BLEDSOE TEL. COOP.](#)

Signature of authorized officer or employee: [Maranda Keith](#)

Digitally signed by Maranda Keith DN:cn=Maranda Keith,email=marandakeith@bledsoe.net,O=bledsoe tel. coop.,l=Pikeville TN 37367-0609, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Maranda Keith](#)

Title or position of authorized officer or employee: [Billing Supervisor](#)

Telephone number of authorized officer or employee: [423-447-2121](#)

Study Area Code of  
Reporting Carrier:

[290554](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [LORETTO TEL. CO., INC.](#)Signature of authorized officer or employee: [Rebecca Hardiman](#)

Digitally signed by Rebecca Hardiman DN:cn=Rebecca Hardiman,email=rebecca.hardiman@lorettotel.com,O=loretto tel. co., inc.,l=Loretto TN 38469, Date:3/15/2021

Date: [3/15/2021](#).Printed name of authorized officer or employee: [Rebecca Hardiman](#)Title or position of authorized officer or employee: [Staff Accountant](#)Telephone number of authorized officer or employee: [931-853-6942](#)Study Area Code of  
Reporting Carrier:[290570](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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>					
I certify that <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">NORTH CENTRAL TEL. COOP., INC.</a>					
Signature of authorized officer or employee: <a href="#">Johnny McClanahan</a>				Digitally signed by Johnny McClanahan DN:cn=Johnny McClanahan,email=johnny.mcclanahan@nctc.com,O=north central tel. coop., inc.,l=Lafayette TN 37083, Date:3/15/2021	
Date: <a href="#">3/15/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Johnny McClanahan</a>					
Title or position of authorized officer or employee: <a href="#">President and CEO</a>					
Telephone number of authorized officer or employee: <a href="#">615-666-2151</a>					
Study Area Code of Reporting Carrier:	<a href="#">290573</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [TWIN LAKES TEL. COOP. CORP.](#)

Signature of authorized officer or employee: [Bridget Betcher](#)

Digitally signed by Bridget Betcher DN:cn=Bridget Betcher,email=bbetcher@twlakes.coop,O=twin lakes tel. coop.,c=US, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Bridget Betcher](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [931-268-2151](#)

Study Area Code of  
Reporting Carrier:

[290579](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [UNITED TEL. CO.-TN DBA UNITED COMMUNICATIONS](#)

Signature of authorized officer or employee: [Kristin Jackson](#)

Digitally signed by Kristin Jackson DN:cn=Kristin Jackson,email=kjackson@gounited.net,O=united tel. co.-tn dba united communications,l=Chapel Hill TN 37034, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Kristin Jackson](#)

Title or position of authorized officer or employee: [CFO](#)

Telephone number of authorized officer or employee: [931-364-4325](#)

Study Area Code of  
Reporting Carrier:

[290581](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WEST KENTUCKY RURAL TELEPHONE COOP. CORP.-TN](#)Signature of authorized officer or employee: [Tiffany Myers](#)

Digitally signed by Tiffany Myers DN:cn=Tiffany Myers,email=tmyers@mywkt.coop,O=west kentucky rural telephone coop. corp.-tn,l=Mayfield KY 42066, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Tiffany Myers](#)Title or position of authorized officer or employee: [Chief Financial Officer](#)Telephone number of authorized officer or employee: [270-804-4110](#)Study Area Code of  
Reporting Carrier:[290598](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">THE ARTHUR MUTUAL TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Eric Roughton</a>				Digitally signed by Eric Roughton DN:cn=Eric Roughton,email=artelco@bright.net,O=the arthur mutual tel. co.,l=Defiance OH 43512, Date:3/25/2021	
Date: <a href="#">3/25/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Eric Roughton</a>					
Title or position of authorized officer or employee: <a href="#">General Manager/Sec'y/Treasurer</a>					
Telephone number of authorized officer or employee: <a href="#">419-393-2233</a>					
Study Area Code of Reporting Carrier:	<a href="#">300586</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [AYERSVILLE TEL. CO.](#)

Signature of authorized officer or employee: [Tami Pontious](#)

Digitally signed by Tami Pontious DN:cn=Tami Pontious,email=tpontious@team-meta.net,O=ayersville tel. co.,l=Defiance OH 43512, Date:3/26/2021

Date: [3/26/2021](#).

Printed name of authorized officer or employee: [Tami Pontious](#)

Title or position of authorized officer or employee: [Controller](#)

Telephone number of authorized officer or employee: [419-395-2222](#)

Study Area Code of  
Reporting Carrier:

[300588](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BASCOM MUTUAL TEL. CO.](#)

Signature of authorized officer or employee: [Laura A. Wise](#)

Digitally signed by Laura A. Wise DN:cn=Laura A. Wise, email=law@bascomtelephone.com, O=bascom mutual tel. co., l=Bascom OH 44809-0316, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Laura A. Wise](#)

Title or position of authorized officer or employee: [Board Assistant Treasurer](#)

Telephone number of authorized officer or employee: [419-937-2222](#)

Study Area Code of  
Reporting Carrier:

[300589](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [BENTON RIDGE TEL. CO.](#)Signature of authorized officer or employee: [Angela Finnerty](#)

Digitally signed by Angela Finnerty DN:cn=Angela Finnerty,email=angelafinnerty@watchcomm.net,O=benton ridge tel. co.,l=Lima OH 45801, Date:3/19/2021

Date: [3/19/2021](#).Printed name of authorized officer or employee: [Angela Finnerty](#)Title or position of authorized officer or employee: [Corporate Accountant](#)Telephone number of authorized officer or employee: [419-859-2144](#)Study Area Code of  
Reporting Carrier:[300590](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">THE CHAMPAIGN TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Tiffany Ebersold</a>				Digitally signed by Tiffany Ebersold DN:cn=Tiffany Ebersold,email=tiffany@ctcommunications.com,O=the champaign tel. co.,l=Urbana OH 43078, Date:3/18/2021	
Date: <a href="#">3/18/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Tiffany Ebersold</a>					
Title or position of authorized officer or employee: <a href="#">Chief Financial Officer</a>					
Telephone number of authorized officer or employee: <a href="#">937-653-2263</a>					
Study Area Code of Reporting Carrier:	<a href="#">300594</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MCCLURE TEL. CO.](#)Signature of authorized officer or employee: [Lance Miller](#)Digitally signed by Lance Miller DN:cn=Lance  
Miller,email=lance@mccluretelephone.com,O=mcclure tel.  
co.,l=McClure OH 43534-0026, Date:3/22/2021Date: [3/22/2021](#).Printed name of authorized officer or employee: [Lance Miller](#)Title or position of authorized officer or employee: [President](#)Telephone number of authorized officer or employee: [419-748-8032](#)Study Area Code of  
Reporting Carrier:[300598](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [CONNEAUT TEL. CO.](#)Signature of authorized officer or employee: [Deanna Brown](#)

Digitally signed by Deanna Brown DN:cn=Deanna Brown,email=dbrown@greatwavecom.com,O=conneaut tel. co.,l=Conneaut OH 44030, Date:3/24/2021

Date: [3/24/2021](#).Printed name of authorized officer or employee: [Deanna Brown](#)Title or position of authorized officer or employee: [CFO](#)Telephone number of authorized officer or employee: [440-593-7138](#)Study Area Code of  
Reporting Carrier:[300606](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [DOYLESTOWN TEL. CO.](#)

Signature of authorized officer or employee: [David Jones](#)

Digitally signed by David Jones DN:cn=David Jones,email=djones@doylestowntelephone.com,O=doylestown tel. co.,l=Doylestown OH 44230, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [David Jones](#)

Title or position of authorized officer or employee: [Accounting Manager](#)

Telephone number of authorized officer or employee: [330-658-3401](#)

Study Area Code of  
Reporting Carrier:

[300609](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [THE FARMERS MUTUAL TEL. CO.-OKOLONA, OH](#)Signature of authorized officer or employee: [Cheryl Bostelman](#)

Digitally signed by Cheryl Bostelman DN:cn=Cheryl Bostelman,email=cbostelman@fmtc.cc,O=the farmers mutual tel. co.-okolona, oh,l=Okolona OH 43545, Date:3/23/2021

Date: [3/23/2021](#).Printed name of authorized officer or employee: [Cheryl Bostelman](#)Title or position of authorized officer or employee: [Secretary/General Manager](#)Telephone number of authorized officer or employee: [419-758-3303](#)Study Area Code of  
Reporting Carrier:[300612](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">FORT JENNINGS TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Michael Metzger</a>				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:3/23/2021	
Date: <a href="#">3/23/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Michael Metzger</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">419-286-2181</a>					
Study Area Code of Reporting Carrier:	<a href="#">300614</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">GLANDORF TEL. CO., INC.</a>					
Signature of authorized officer or employee: <a href="#">David L. Hunt</a>				Digitally signed by David L. Hunt DN:cn=David L. Hunt,email=hunt@bright.net,O=glandorf tel. co., inc.,l=Glandorf OH 45848, Date:3/17/2021	
Date: <a href="#">3/17/2021</a> .					
Printed name of authorized officer or employee: <a href="#">David L. Hunt</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">419-538-6987</a>					
Study Area Code of Reporting Carrier:	<a href="#">300619</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [KALIDA TEL. CO., INC.](#)

Signature of authorized officer or employee: [Chris Phillips](#)

Digitally signed by Chris Phillips DN:cn=Chris Phillips,email=chrisp@kalidatel.com,O=kalida tel. co., inc.,l=Kalida OH 45853, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Chris Phillips](#)

Title or position of authorized officer or employee: [Manager](#)

Telephone number of authorized officer or employee: [419-532-3218](#)

Study Area Code of  
Reporting Carrier:

[300625](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MINFORD TEL. CO., INC.](#)

Signature of authorized officer or employee: [Paula J. McGraw](#)

Digitally signed by Paula J. McGraw DN:cn=Paula J. McGraw, email=pmcgraw@falcon1.net, O=minford tel. co., inc., l=Minford OH 45653, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Paula J. McGraw](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [740-820-2151](#)

Study Area Code of  
Reporting Carrier:

[300634](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [THE OTTOVILLE MUTUAL TEL. CO.](#)Signature of authorized officer or employee: [William J Honigford](#)

Digitally signed by William J Honigford DN:cn=William J Honigford,email=billh@ottovillemutual.com,O=the ottoville mutual tel. co.,l=Ottoville OH 45876-0427, Date:3/16/2021

Date: [3/16/2021](#).Printed name of authorized officer or employee: [William J Honigford](#)Title or position of authorized officer or employee: [General Manager](#)Telephone number of authorized officer or employee: [419-453-3324](#)Study Area Code of  
Reporting Carrier:[300650](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SHERWOOD MUTUAL TEL. ASSOC.](#)

Signature of authorized officer or employee: [Richard Rostorfer](#)

Digitally signed by Richard Rostorfer DN:cn=Richard Rostorfer,email=rickrostorfer@smta.cc,O=sherwood mutual tel. assoc.,l=Sherwood OH 43556, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Richard Rostorfer](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [419-899-2121](#)

Study Area Code of  
Reporting Carrier:

[300656](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [VAUGHNSVILLE TEL. CO., INC.](#)

Signature of authorized officer or employee: [Martha J. Kaplan](#)

Digitally signed by Martha J. Kaplan DN:cn=Martha J. Kaplan,email=vvtelco@bright.net,O=vaughnsville tel. co.,inc.,l=Vaughnsville OH 45893-0127, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Martha J. Kaplan](#)

Title or position of authorized officer or employee: [Manager/Secretary/Treasurer](#)

Telephone number of authorized officer or employee: [419-646-3431](#)

Study Area Code of  
Reporting Carrier:

[300663](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BLANCHARD TELEPHONE CO.](#)

Signature of authorized officer or employee: [Ronald Ray](#)

Digitally signed by Ronald Ray DN:cn=Ronald Ray,email=rray@blanchardtel.com,O=blanchard telephone co.,l=Blanchard MI 49310, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Ronald Ray](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [989-561-9932](#)

Study Area Code of  
Reporting Carrier:

[310678](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [BLOOMINGDALE TEL. CO.](#)Signature of authorized officer or employee: [Steve Shults](#)

Digitally signed by Steve Shults DN:cn=Steve Shults,email=syshults@bloomingdalecom.net,O=bloomingdale tel. co.,l=Bloomingdale MI 49026, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Steve Shults](#)Title or position of authorized officer or employee: [CEO/General Manager](#)Telephone number of authorized officer or employee: [269-521-7313](#)Study Area Code of  
Reporting Carrier:[310679](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CLIMAX TEL. CO.](#)

Signature of authorized officer or employee: [Pamela Dewey](#)

Digitally signed by Pamela Dewey DN:cn=Pamela Dewey,email=pdewey@ctstelecom.com,O=climax tel. co.,l=Galesburg MI 49053, Date:3/24/2021

Date: [3/24/2021](#).

Printed name of authorized officer or employee: [Pamela Dewey](#)

Title or position of authorized officer or employee: [Controller](#)

Telephone number of authorized officer or employee: [269-746-3292](#)

Study Area Code of  
Reporting Carrier:

[310688](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [DEERFIELD FARMERS TEL. CO.](#)Signature of authorized officer or employee: [Victoria Stevens](#)

Digitally signed by Victoria Stevens DN:cn=Victoria Stevens,email=Victoria.stevens@d-pcomm.com,O=deerfield farmers tel. co.,l=Petersburg MI 49270, Date:3/18/2021

Date: [3/18/2021](#).Printed name of authorized officer or employee: [Victoria Stevens](#)Title or position of authorized officer or employee: [HR/RSC Manager](#)Telephone number of authorized officer or employee: [734-279-5535](#)Study Area Code of  
Reporting Carrier:[310691](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [ACE TEL. CO. OF MI, INC.](#)Signature of authorized officer or employee: [Cynthia Sweet](#)

Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace tel. co. of mi, inc.,l=Houston MN 55943-0360, Date:3/23/2021

Date: [3/23/2021](#).Printed name of authorized officer or employee: [Cynthia Sweet](#)Title or position of authorized officer or employee: [Controller](#)Telephone number of authorized officer or employee: [507-896-6211](#)Study Area Code of  
Reporting Carrier:[310704](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LENNON TEL. CO.](#)

Signature of authorized officer or employee: [Randy K. Fletcher](#)

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:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Randy K. Fletcher](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [810-621-3304](#)

Study Area Code of  
Reporting Carrier:

[310708](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">OGDEN TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Kristen K Fisher</a>				Digitally signed by Kristen K Fisher DN:cn=Kristen K Fisher,email=fisher@ogdentel.com,O=ogden tel. co.,l=Blissfield MI 49228, Date:3/22/2021	
Date: <a href="#">3/22/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Kristen K Fisher</a>					
Title or position of authorized officer or employee: <a href="#">Secretary-Treasurer</a>					
Telephone number of authorized officer or employee: <a href="#">517-443-5595</a>					
Study Area Code of Reporting Carrier:	<a href="#">310714</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">PIGEON TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Neal B. Eichler</a>				Digitally signed by Neal B. Eichler DN:cn=Neal B. Eichler,email=naeic@avci.net,O=Pigeon tel. co.,l=Pigeon MI 48755, Date:3/15/2021	
Date: <a href="#">3/15/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Neal B. Eichler</a>					
Title or position of authorized officer or employee: <a href="#">Vice President</a>					
Telephone number of authorized officer or employee: <a href="#">989-453-4391</a>					
Study Area Code of Reporting Carrier:	<a href="#">310721</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">SPRINGPORT TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Mark Cutler</a>				<small>Digitally signed by Mark Cutler DN:cn=Mark Cutler,email=markc@springcom.com,O=springport tel. co.,l=Springport MI 49284-0208, Date:3/22/2021</small>	
Date: <a href="#">3/22/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Mark Cutler</a>					
Title or position of authorized officer or employee: <a href="#">Accountant</a>					
Telephone number of authorized officer or employee: <a href="#">517-857-3100</a>					
Study Area Code of Reporting Carrier:	<a href="#">310728</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">WALDRON TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Lucinda Bernath</a>				Digitally signed by Lucinda Bernath DN:cn=Lucinda Bernath,email=cindy@waldrontel.com,O=waldron tel. co.,l=Waldron MI 49288-0197, Date:3/17/2021	
Date: <a href="#">3/17/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Lucinda Bernath</a>					
Title or position of authorized officer or employee: <a href="#">Vice President</a>					
Telephone number of authorized officer or employee: <a href="#">517-286-6211</a>					
Study Area Code of Reporting Carrier:	<a href="#">310734</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">WINN TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Mark Graf</a>				Digitally signed by Mark Graf DN:cn=Mark Graf,email=mgraf@winntel.com,O=winntel. co.,I=Winn MI 48896, Date:3/22/2021	
Date: <a href="#">3/22/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Mark Graf</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">989-953-9876</a>					
Study Area Code of Reporting Carrier:	<a href="#">310737</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [CITIZENS TEL. CORP.-WARREN](#)Signature of authorized officer or employee: [Joan Paxson](#)

Digitally signed by Joan Paxson DN:cn=Joan Paxson,email=joanie@citznet.com,O=citizens tel. corp.-warren,l=Warren IN 46792, Date:3/24/2021

Date: [3/24/2021](#).Printed name of authorized officer or employee: [Joan Paxson](#)Title or position of authorized officer or employee: [Secretary, Office Manager](#)Telephone number of authorized officer or employee: [260-375-2111](#)Study Area Code of  
Reporting Carrier:[320751](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CLAY CTY. RURAL TEL COOP INC D/B/A ENDEAVOR](#)

Signature of authorized officer or employee: [Darin LaCoursiere](#)

Digitally signed by Darin LaCoursiere DN:cn=Darin LaCoursiere,email=darinl@weEndeavor.com,O=clay cty. rural tel coop inc d/b/a endeavor,l=Cloverdale IN 46120-0237, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Darin LaCoursiere](#)

Title or position of authorized officer or employee: [President and CEO](#)

Telephone number of authorized officer or employee: [765-795-4261](#)

Study Area Code of  
Reporting Carrier:

[320753](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [CRAIGVILLE TEL. CO., INC.](#)Signature of authorized officer or employee: [Lee Von Gunten](#)

Digitally signed by Lee Von Gunten DN:cn=Lee Von Gunten,email=lee@adamswells.com,O=craigville tel. co.,inc.,l=Craigville IN 46731, Date:3/24/2021

Date: [3/24/2021](#).Printed name of authorized officer or employee: [Lee Von Gunten](#)Title or position of authorized officer or employee: [General Manager](#)Telephone number of authorized officer or employee: [260-565-3131](#)Study Area Code of  
Reporting Carrier:[320756](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">DAVIESS-MARTIN CTY. RURAL TEL. DBA RTC COMM.</a>					
Signature of authorized officer or employee: <a href="#">Kirk Lehman</a>				Digitally signed by Kirk Lehman DN:cn=Kirk Lehman,email=klehman@rtccom.com,O=daviess-martin cty. rural tel. dba rtc comm.,l=Montgomery IN 47558, Date:3/24/2021	
Date: <a href="#">3/24/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Kirk Lehman</a>					
Title or position of authorized officer or employee: <a href="#">CEO/Executive VP</a>					
Telephone number of authorized officer or employee: <a href="#">812-486-3211</a>					
Study Area Code of Reporting Carrier:	<a href="#">320759</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GEETINGSVILLE TEL. CO., INC.](#)

Signature of authorized officer or employee: [Steve Scott](#)

Digitally signed by Steve Scott DN:cn=Steve Scott,email=support@geetel.net,O=geetingsville tel. co., inc.,l=Frankfort IN 46041-7799, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Steve Scott](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [765-258-3111](#)

Study Area Code of  
Reporting Carrier:

[320771](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [HANCOCK RURAL TEL. CORP. DBA NINESTAR CONNECT](#)Signature of authorized officer or employee: [Michael R. Burrow](#)

Digitally signed by Michael R. Burrow DN:cn=Michael R. Burrow, email=mburrow@ninstarconnect.com, O=hancock rural tel. corp. dba ninstar connect, l=Greenfield IN 46140, Date:3/24/2021

Date: [3/24/2021](#).Printed name of authorized officer or employee: [Michael R. Burrow](#)Title or position of authorized officer or employee: [President and CEO](#)Telephone number of authorized officer or employee: [317-326-2101](#)Study Area Code of  
Reporting Carrier:[320775](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LIGONIER TEL. CO.](#)

Signature of authorized officer or employee: [Randy Mead](#)

Digitally signed by Randy Mead DN:cn=Randy Mead,email=rmead@ligtel.net,O=Ligonier tel. co.,l=Ligonier IN 46767, Date:3/24/2021

Date: [3/24/2021](#).

Printed name of authorized officer or employee: [Randy Mead](#)

Title or position of authorized officer or employee: [Vice President and General Manager](#)

Telephone number of authorized officer or employee: [260-894-7161](#)

Study Area Code of  
Reporting Carrier:

[320783](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">MONON TEL. CO., INC.</a>					
Signature of authorized officer or employee: <a href="#">Bruce Hanway</a>				Digitally signed by Bruce Hanway DN:cn=Bruce Hanway,email=bruceh@urhere.net,O=monon tel. co., inc.,l=Monon IN 47959, Date:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Bruce Hanway</a>					
Title or position of authorized officer or employee: <a href="#">Secretary/Treasurer</a>					
Telephone number of authorized officer or employee: <a href="#">219-253-6601</a>					
Study Area Code of Reporting Carrier:	<a href="#">320790</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MULBERRY COOP. TEL. CO., INC.](#)Signature of authorized officer or employee: [Randy Maish](#)Digitally signed by Randy Maish DN:cn=Randy  
Maish,email=randy@mintel.net,O=mulberry coop. tel. co.,  
inc.,l=mulberry IN 46058, Date:3/24/2021Date: [3/24/2021](#).Printed name of authorized officer or employee: [Randy Maish](#)Title or position of authorized officer or employee: [CEO](#)Telephone number of authorized officer or employee: [765-296-2885](#)Study Area Code of  
Reporting Carrier:[320792](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">NEW LISBON TEL. CO., INC.</a>					
Signature of authorized officer or employee: <a href="#">John Greene</a>				Digitally signed by John Greene DN:cn=John Greene,email=john.greene@nlbc.com,O=new lisbon tel. co.,inc.,l=New Lisbon IN 47366, Date:3/22/2021	
Date: <a href="#">3/22/2021</a> .					
Printed name of authorized officer or employee: <a href="#">John Greene</a>					
Title or position of authorized officer or employee: <a href="#">CEO</a>					
Telephone number of authorized officer or employee: <a href="#">765-332-2413</a>					
Study Area Code of Reporting Carrier:	<a href="#">320796</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">NEW PARIS TEL., INC.</a>					
Signature of authorized officer or employee: <a href="#">Paul Penrose</a>				Digitally signed by Paul Penrose DN:cn=Paul Penrose,email=ppenrose@nptel.com,O=new paris tel., inc.,l=New Paris IN 46553-0047, Date:3/26/2021	
Date: <a href="#">3/26/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Paul Penrose</a>					
Title or position of authorized officer or employee: <a href="#">CFO</a>					
Telephone number of authorized officer or employee: <a href="#">574-831-7115</a>					
Study Area Code of Reporting Carrier:	<a href="#">320797</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [NORTHWESTERN INDIANA TEL. CO., INC.](#)Signature of authorized officer or employee: [Thomas C. Long](#)

Digitally signed by Thomas C. Long DN:cn=Thomas C. Long,email=tlong@nitco.com,O=northwestern indiana tel. co.,inc.,l=Hebron IN 46341, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Thomas C. Long](#)Title or position of authorized officer or employee: [COO](#)Telephone number of authorized officer or employee: [219-996-2981](#)Study Area Code of  
Reporting Carrier:[320800](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [PERRY-SPENCER RURAL TEL. COOP., INC. DBA PSC](#)

Signature of authorized officer or employee: [James M. Dauby](#)

Digitally signed by James M. Dauby DN:cn=James M. Dauby,email=jdauby@psci.net,O=perry-spencer rural tel. coop., inc. dba psc,l=St. Meinrad IN 47577, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [James M. Dauby](#)

Title or position of authorized officer or employee: [President/CEO](#)

Telephone number of authorized officer or employee: [812-357-2123](#)

Study Area Code of  
Reporting Carrier:

[320807](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">PULASKI-WHITE RURAL TEL. COOP.dba LIGHTSTREAM</a>					
Signature of authorized officer or employee: <a href="#">Denise Wickersham</a>				Digitally signed by Denise Wickersham DN:cn=Denise Wickersham,email=dwickersham@lightstreamin.net,O=pulaski-white rural tel. coop.dba lightstream,l=Buffalo IN 47925, Date:3/18/2021	
Date: <a href="#">3/18/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Denise Wickersham</a>					
Title or position of authorized officer or employee: <a href="#">Controller</a>					
Telephone number of authorized officer or employee: <a href="#">574-278-7121</a>					
Study Area Code of Reporting Carrier:	<a href="#">320813</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [ROCHESTER TEL. CO., INC.](#)

Signature of authorized officer or employee: [Greta Lynch](#)

Digitally signed by Greta Lynch DN:cn=Greta  
Lynch,email=greta.lynnch@rtc1.com,O=rochester tel. co.,  
inc.,l=Rochester IN 46975-1509, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Greta Lynch](#)

Title or position of authorized officer or employee: [VP-Finance](#)

Telephone number of authorized officer or employee: [574-223-0238](#)

Study Area Code of  
Reporting Carrier:

[320815](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SOUTHEASTERN INDIANA RURAL TEL. COOP., INC.](#)

Signature of authorized officer or employee: [Aliesha Niebrugge](#)

Digitally signed by Aliesha Niebrugge DN:cn=Aliesha Niebrugge,email=niebruggea@seidata.com,O=southeastern indianarural tel. coop., inc.,l=Dillsboro IN 47018-0007, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Aliesha Niebrugge](#)

Title or position of authorized officer or employee: [Business Office Supervisor](#)

Telephone number of authorized officer or employee: [812-667-5100](#)

Study Area Code of  
Reporting Carrier:

[320819](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [SUNMAN TELECOMMUNICATIONS LLC](#)Signature of authorized officer or employee: [Michael J. Alig](#)Digitally signed by Michael J. Alig DN:cn=Michael J.  
Alig,email=malig@etc1.net,O=sunman telecommunications  
llc,l=Sunman IN 47041, Date:3/26/2021Date: [3/26/2021](#).Printed name of authorized officer or employee: [Michael J. Alig](#)Title or position of authorized officer or employee: [Chief Financial Officer](#)Telephone number of authorized officer or employee: [812-623-2122](#)Study Area Code of  
Reporting Carrier:[320825](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SWAYZEE TEL. CO., INC.](#)

Signature of authorized officer or employee: [Audra Hicks](#)

Digitally signed by Audra Hicks DN:cn=Audra Hicks,email=ahicks@swayzee.com,O=swayzee tel. co.,inc.,l=Swayzee IN 46986, Date:3/24/2021

Date: [3/24/2021](#).

Printed name of authorized officer or employee: [Audra Hicks](#)

Title or position of authorized officer or employee: [Office Manager](#)

Telephone number of authorized officer or employee: [765-922-7916](#)

Study Area Code of  
Reporting Carrier:

[320826](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [SWEETSER RURAL TEL. CO., INC.](#)Signature of authorized officer or employee: [Scott A. Winger](#)Digitally signed by Scott A. Winger DN:cn=Scott A.  
Winger,email=sawinger@comteck.com,O=sweetser rural tel. co.,  
inc.,l=Sweetser IN 46987, Date:3/25/2021Date: [3/25/2021](#).Printed name of authorized officer or employee: [Scott A. Winger](#)Title or position of authorized officer or employee: [President](#)Telephone number of authorized officer or employee: [765-384-4311](#)Study Area Code of  
Reporting Carrier:[320827](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WASH. CTY. RURAL TEL. COOP., INC.](#)Signature of authorized officer or employee: [Sara Morris](#)

Digitally signed by Sara Morris DN:cn=Sara Morris,email=sara.morris@tele-mediasolutions.coop,O=wash. ctly. rural tel. coop., inc.,l=Pekin IN 47165, Date:3/18/2021

Date: [3/18/2021](#).Printed name of authorized officer or employee: [Sara Morris](#)Title or position of authorized officer or employee: [Accounting Manager](#)Telephone number of authorized officer or employee: [812-967-5529](#)Study Area Code of  
Reporting Carrier:[320834](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [YEOMAN TEL. CO., INC.](#)

Signature of authorized officer or employee: [David W. Blacker](#)

Digitally signed by David W. Blacker DN:cn=David W. Blacker, email=dblacke@fiberhawk.com, O=yeoman tel. co., inc., l=Yeoman IN 47997, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [David W. Blacker](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [574-965-2100](#)

Study Area Code of  
Reporting Carrier:

[320839](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CHEQUAMEGON COMMUNICATIONS COOPERATIVE, INC.](#)

Signature of authorized officer or employee: [Robert Thompson](#)

Digitally signed by Robert Thompson DN:cn=Robert Thompson,email=rthompson@norvado.com,O=chequamegon communications cooperative, inc.,l=Cable WI 54821, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Robert Thompson](#)

Title or position of authorized officer or employee: [CFO](#)

Telephone number of authorized officer or employee: [715-798-3303](#)

Study Area Code of  
Reporting Carrier:

[330860](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CHIBARDUN TEL. COOP., INC.](#)

Signature of authorized officer or employee: [Domenico Fornaro](#)

Digitally signed by Domenico Fornaro DN:cn=Domenico Fornaro,email=dfornaro@mosaictelecom.com,O=chibardun tel. coop.,inc.,l=Cameron WI 54822, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Domenico Fornaro](#)

Title or position of authorized officer or employee: [CEO](#)

Telephone number of authorized officer or employee: [715-458-5400](#)

Study Area Code of  
Reporting Carrier:

[330861](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CITIZENS TEL. COOP., INC.-WI](#)

Signature of authorized officer or employee: [Dennis L. Bachman](#)

Digitally signed by Dennis L. Bachman DN:cn=Dennis L. Bachman,email=dbachman@citizens-connected.com,O=citizens tel. coop., inc.-wi,l=New Auburn WI 54757-0127, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Dennis L. Bachman](#)

Title or position of authorized officer or employee: [CEO/General Manager](#)

Telephone number of authorized officer or employee: [715-237-2605](#)

Study Area Code of  
Reporting Carrier:

[330863](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [COCHRANE COOP. TEL. CO.](#)

Signature of authorized officer or employee: [Gina Tomlinson](#)

Digitally signed by Gina Tomlinson DN:cn=Gina Tomlinson, email=ginat@mwt.net, O=cochrane coop. tel. co., l=Cochrane WI 54622-0189, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Gina Tomlinson](#)

Title or position of authorized officer or employee: [Chief Executive Officer](#)

Telephone number of authorized officer or employee: [608-248-2323](#)

Study Area Code of  
Reporting Carrier:

[330866](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">LAKEFIELD TELEPHONE COMPANY</a>					
Signature of authorized officer or employee: <a href="#">Jim Paulos</a>				Digitally signed by Jim Paulos DN:cn=Jim Paulos,email=jim.paulos@nsight.com,O=lakefield telephone company,l=Green Bay WI 54313, Date:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Jim Paulos</a>					
Title or position of authorized officer or employee: <a href="#">Fixed Operations Manager</a>					
Telephone number of authorized officer or employee: <a href="#">920-617-7085</a>					
Study Area Code of Reporting Carrier:	<a href="#">330896</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">LA VALLE TEL. COOP.</a>					
Signature of authorized officer or employee: <a href="#">Gregory Rockweiler</a>				Digitally signed by Gregory Rockweiler DN:cn=Gregory Rockweiler,email=greg@ltc.coop,O=la valle tel. coop.,l=La Valle WI 53941, Date:3/17/2021	
Date: <a href="#">3/17/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Gregory Rockweiler</a>					
Title or position of authorized officer or employee: <a href="#">Assistant Secretary</a>					
Telephone number of authorized officer or employee: <a href="#">608-985-7201</a>					
Study Area Code of Reporting Carrier:	<a href="#">330899</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">LEMONWEIR VALLEY TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Donna Rezin</a>				Digitally signed by Donna Rezin DN:cn=Donna Rezin,email=Donna.Rezin@getlynxx.com,O=lemonweir valley tel. co.,l=Camp Douglas WI 54618, Date:3/22/2021	
Date: <a href="#">3/22/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Donna Rezin</a>					
Title or position of authorized officer or employee: <a href="#">Treasurer</a>					
Telephone number of authorized officer or employee: <a href="#">608-427-6515</a>					
Study Area Code of Reporting Carrier:	<a href="#">330900</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LAKELAND COMMUNICATIONS GROUP, LLC](#)

Signature of authorized officer or employee: [Crystal Morley](#)

Digitally signed by Crystal Morley DN:cn=Crystal Morley,email=crystalm@lakeland.ws,O=lakeland communications group, llc,l=Milltown WI 54858, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Crystal Morley](#)

Title or position of authorized officer or employee: [Accounting Manager](#)

Telephone number of authorized officer or employee: [715-825-5105](#)

Study Area Code of  
Reporting Carrier:

[330902](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MARQUETTE-ADAMS TEL. COOP., INC.](#)

Signature of authorized officer or employee: [Jerry Schneider](#)

Digitally signed by Jerry Schneider DN:cn=Jerry Schneider,email=jschneider@maadtelco.com,O=marquette-adams tel. coop., inc.,l=Oxford WI 53952, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Jerry Schneider](#)

Title or position of authorized officer or employee: [CEO & General Manager](#)

Telephone number of authorized officer or employee: [608-586-4111](#)

Study Area Code of  
Reporting Carrier:

[330908](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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>					
I certify that <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">NELSON COMMUNICATIONS COOPERATIVE</a>					
Signature of authorized officer or employee: <a href="#">Christy A. Berger</a>				Digitally signed by Christy A. Berger DN:cn=Christy A. Berger,email=christy@ntec.net,O=nelson communications cooperative,l=Durand WI 54736-0228, Date:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Christy A. Berger</a>					
Title or position of authorized officer or employee: <a href="#">Executive Vice President</a>					
Telephone number of authorized officer or employee: <a href="#">715-672-4204</a>					
Study Area Code of Reporting Carrier:	<a href="#">330918</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">NIAGARA TELEPHONE COMPANY</a>					
Signature of authorized officer or employee: <a href="#">Jim Paulos</a>				Digitally signed by Jim Paulos DN:cn=Jim Paulos,email=jim.paulos@nsight.com,O=niagara telephone company,l=Green Bay WI 54313, Date:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Jim Paulos</a>					
Title or position of authorized officer or employee: <a href="#">Fixed Operations Manager</a>					
Telephone number of authorized officer or employee: <a href="#">920-617-7085</a>					
Study Area Code of Reporting Carrier:	<a href="#">330920</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">BAYLAND TELEPHONE, LLC</a>					
Signature of authorized officer or employee: <a href="#">Jim Paulos</a>				<small>Digitally signed by Jim Paulos DN:cn=Jim Paulos,email=jim.paulos@nsight.com,O=bayland telephone, llc,l=Green Bay WI 54313, Date:3/16/2021</small>	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Jim Paulos</a>					
Title or position of authorized officer or employee: <a href="#">Fixed Operations Manager</a>					
Telephone number of authorized officer or employee: <a href="#">920-617-7085</a>					
Study Area Code of Reporting Carrier:	<a href="#">330925</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [PRICE COUNTY TEL. CO.](#)

Signature of authorized officer or employee: [Robert Thompson](#)

Digitally signed by Robert Thompson DN:cn=Robert Thompson,email=rthompson@norvado.com,O=price county tel. co.,l=Cable WI 54821, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Robert Thompson](#)

Title or position of authorized officer or employee: [CFO](#)

Telephone number of authorized officer or employee: [715-798-3303](#)

Study Area Code of  
Reporting Carrier:

[330937](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">NORTHEAST TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Jim Paulos</a>				Digitally signed by Jim Paulos DN:cn=Jim Paulos, email=jim.paulos@nsight.com, O=northeast tel. co., l=Green Bay WI 54313, Date:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Jim Paulos</a>					
Title or position of authorized officer or employee: <a href="#">Fixed Operations Manager</a>					
Telephone number of authorized officer or employee: <a href="#">920-617-7085</a>					
Study Area Code of Reporting Carrier:	<a href="#">330938</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SHARON TEL. CO.](#)

Signature of authorized officer or employee: [Brad Ellefson](#)

Digitally signed by Brad Ellefson DN:cn=Brad Ellefson,email=brad@sharontelephone.com,O=sharon tel. co.,l=Sharon WI 53585, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Brad Ellefson](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [262-736-9981](#)

Study Area Code of  
Reporting Carrier:

[330946](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SIREN TEL. CO., INC.](#)

Signature of authorized officer or employee: [Sid Sherstad](#)

Digitally signed by Sid Sherstad DN:cn=Sid  
Sherstad,email=sherstad@sirentel.net,O=siren tel. co., inc.,l=Siren WI  
54872-0426, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Sid Sherstad](#)

Title or position of authorized officer or employee: [Vice President](#)

Telephone number of authorized officer or employee: [715-349-2224](#)

Study Area Code of  
Reporting Carrier:

[330949](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SPRING VALLEY TEL. CO., INC.](#)

Signature of authorized officer or employee: [Carol Anderson](#)

Digitally signed by Carol Anderson DN:cn=Carol Anderson,email=svtel@svtel.net,O=spring valley tel. co., inc.,l=Spring Valley WI 54767, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Carol Anderson](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [715-778-4433](#)

Study Area Code of  
Reporting Carrier:

[330953](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WEST WISCONSIN TELCOM COOP., INC.](#)Signature of authorized officer or employee: [Mark Stenseth](#)

Digitally signed by Mark Stenseth DN:cn=Mark Stenseth,email=stenseth@wwt.coop,O=west wisconsin telcom coop.,inc.,l=Downsville WI 54735, Date:3/18/2021

Date: [3/18/2021](#).Printed name of authorized officer or employee: [Mark Stenseth](#)Title or position of authorized officer or employee: [CEO/General Manager](#)Telephone number of authorized officer or employee: [715-664-8311](#)Study Area Code of  
Reporting Carrier:[330971](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WOOD COUNTY TEL. CO.](#)Signature of authorized officer or employee: [Justin Huebner](#)

Digitally signed by Justin Huebner DN:cn=Justin Huebner,email=jhuebner@solarus.net,O=wood county tel. co.,l=Wisconsin Rapids WI 54494, Date:3/18/2021

Date: [3/18/2021](#).Printed name of authorized officer or employee: [Justin Huebner](#)Title or position of authorized officer or employee: [Chief Executive Officer](#)Telephone number of authorized officer or employee: [715-421-8140](#)Study Area Code of  
Reporting Carrier:[330974](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [EGYPTIAN TEL. COOP. ASSN.](#)

Signature of authorized officer or employee: [Matt Bollinger](#)

Digitally signed by Matt Bollinger DN:cn=Matt Bollinger,email=mbollinger@egyptian.net,O=egyptian tel. coop. assn.,l=Steeleville IL 62288, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Matt Bollinger](#)

Title or position of authorized officer or employee: [Executive Vice President/General Manager](#)

Telephone number of authorized officer or employee: [618-774-1000](#)

Study Area Code of  
Reporting Carrier:

[341003](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [THE GRANDVIEW MUTUAL TEL. CO.](#)Signature of authorized officer or employee: [Angela Tate](#)Digitally signed by Angela Tate DN:cn=Angela  
Tate,email=gmte@joink.com,O=the grandview mutual tel. co.,l=Paris  
IL 61944, Date:3/15/2021Date: [3/15/2021](#).Printed name of authorized officer or employee: [Angela Tate](#)Title or position of authorized officer or employee: [Treasurer](#)Telephone number of authorized officer or employee: [217-946-4101](#)Study Area Code of  
Reporting Carrier:[341021](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GRIDLEY TEL. CO.](#)

Signature of authorized officer or employee: [Herb Flesher](#)

Digitally signed by Herb Flesher DN:cn=Herb Flesher,email=hflesher@gridtel.com,O=gridley tel. co.,l=Gridley IL 61744-0129, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Herb Flesher](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [309-747-3780](#)

Study Area Code of  
Reporting Carrier:

[341023](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [HARRISONVILLE TEL. CO.](#)

Signature of authorized officer or employee: [Lee Whitcher](#)

Digitally signed by Lee Whitcher DN:cn=Lee Whitcher,email=htclhw@htc.net,O=harrisonville tel. co.,l=Waterloo IL 62298-0149, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Lee Whitcher](#)

Title or position of authorized officer or employee: [Vice President of Regulatory Compliance](#)

Telephone number of authorized officer or employee: [618-939-9252](#)

Study Area Code of  
Reporting Carrier:

[341026](#)

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


[03/31/2021](#)

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

**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>3/16/2021</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>3/31/2021</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**

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LA HARPE TEL. CO.](#)

Signature of authorized officer or employee: [Todd Irish](#)

Digitally signed by Todd Irish DN:cn=Todd Irish,email=todd@laharpetelephone.com,O=la harpe tel. co.,l=La Harpe IL 61450, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Todd Irish](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [217-659-7721](#)

Study Area Code of  
Reporting Carrier:

[341043](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LEAF RIVER TEL. CO.](#)

Signature of authorized officer or employee: [Aaron L. Palmer](#)

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:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Aaron L. Palmer](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [815-738-2216](#)

Study Area Code of  
Reporting Carrier:

[341045](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MCDONOUGH TELEPHONE COOPERATIVE](#)

Signature of authorized officer or employee: [Jay Griswold](#)

Digitally signed by Jay Griswold DN:cn=Jay  
Griswold,email=jgriswold@mdtc.net,O=mcdonough telephone  
cooperative,l=Colchester IL 62326, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Jay Griswold](#)

Title or position of authorized officer or employee: [President/CEO](#)

Telephone number of authorized officer or employee: [309-776-3211](#)

Study Area Code of  
Reporting Carrier:

[341047](#)

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


[03/31/2021](#)

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

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>3/18/2021</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) 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>3/31/2021</u>	
<small>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</small>			

Certification-Agent

TRANSMITTAL NO. 1635

**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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MARSEILLES TEL. CO. OF MARS.](#)

Signature of authorized officer or employee: [Ann Rauh Dickerson](#)

Digitally signed by Ann Rauh Dickerson DN:cn=Ann Rauh  
Dickerson,email=adickerson@corp.mtco.com,O=marseilles tel. co. of  
mars.,l=Metamora IL 61548-0800, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Ann Rauh Dickerson](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [309-367-4197](#)

Study Area Code of  
Reporting Carrier:

[341050](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">METAMORA TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Ann Rauh Dickerson</a>				Digitally signed by Ann Rauh Dickerson DN:cn=Ann Rauh Dickerson, email=adickerson@corp.mtco.com,O=metamora tel. co.,l=Metamora IL 61548-0800, Date:3/19/2021	
Date: <a href="#">3/19/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Ann Rauh Dickerson</a>					
Title or position of authorized officer or employee: <a href="#">Chief Financial Officer</a>					
Telephone number of authorized officer or employee: <a href="#">309-367-4197</a>					
Study Area Code of Reporting Carrier:	<a href="#">341053</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">MONTROSE MUTUAL TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Barry Adair</a>				Digitally signed by Barry Adair DN:cn=Barry Adair,email=barryadair@wabash.net,O=montrose mutual tel. co.,l=Louisville IL 62858, Date:3/19/2021	
Date: <a href="#">3/19/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Barry Adair</a>					
Title or position of authorized officer or employee: <a href="#">CEO/General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">618-665-3311</a>					
Study Area Code of Reporting Carrier:	<a href="#">341058</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [ONEIDA TEL. EXCHANGE](#)

Signature of authorized officer or employee: [Troy Nimrick](#)

Digitally signed by Troy Nimrick DN:cn=Troy  
Nimrick,email=troy@oneidatel.com,O=oneida tel. exchange,l=Oneida  
IL 61467, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Troy Nimrick](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [309-483-3111](#)

Study Area Code of  
Reporting Carrier:

[341066](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [VIOLA HOME TEL. CO.](#)

Signature of authorized officer or employee: [Jay D. Barton](#)

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:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Jay D. Barton](#)

Title or position of authorized officer or employee: [Assistant Secretary](#)

Telephone number of authorized officer or employee: [309-596-2222](#)

Study Area Code of  
Reporting Carrier:

[341087](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WABASH TEL COOP, INC. DBA WABASH COMM CO-OP](#)Signature of authorized officer or employee: [Barry Adair](#)Digitally signed by Barry Adair DN:cn=Barry  
Adair,email=barryadair@wabash.net,O=wabash tel coop, inc. dba  
wabash comm co-op,l=Louisville IL 62858, Date:3/19/2021Date: [3/19/2021](#).Printed name of authorized officer or employee: [Barry Adair](#)Title or position of authorized officer or employee: [CEO/General Manager](#)Telephone number of authorized officer or employee: [618-665-3311](#)Study Area Code of  
Reporting Carrier:[341088](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [ALPINE COMMUNICATIONS, L.C.](#)

Signature of authorized officer or employee: [Chris Hopp](#)

Digitally signed by Chris Hopp DN:cn=Chris Hopp,email=chopp@alpinecom.net,O=alpine communications, l.c.,l=Elkader IA 52043, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Chris Hopp](#)

Title or position of authorized officer or employee: [Chief Operating Officer](#)

Telephone number of authorized officer or employee: [563-245-4480](#)

Study Area Code of  
Reporting Carrier:

[351106](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">CASCADE COMMUNICATIONS COMPANY</a>					
Signature of authorized officer or employee: <a href="#">David L. Gibson</a>				Digitally signed by David L. Gibson DN:cn=David L. Gibson,email=dave@cascadecomm.com,O=cascade communications company,l=Cascade IA 52033-0250, Date:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">David L. Gibson</a>					
Title or position of authorized officer or employee: <a href="#">General Manager/Compliance Officer</a>					
Telephone number of authorized officer or employee: <a href="#">563-852-3710</a>					
Study Area Code of Reporting Carrier:	<a href="#">351118</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CLEAR LAKE INDP. TEL. CO.](#)

Signature of authorized officer or employee: [Thomas Lovell](#)

Digitally signed by Thomas Lovell DN:cn=Thomas Lovell,email=tomlovell@cltel.com,O=clear lake indp. tel. co.,l=Clear Lake IA 50428-0066, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Thomas Lovell](#)

Title or position of authorized officer or employee: [General Manager/Vice President](#)

Telephone number of authorized officer or employee: [641-357-2111](#)

Study Area Code of  
Reporting Carrier:

[351132](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">COLO TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Larry W. Springer</a>				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:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Larry W. Springer</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">641-377-2202</a>					
Study Area Code of Reporting Carrier:	<a href="#">351134</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [DUMONT TEL. CO.](#)

Signature of authorized officer or employee: [Roger Kregel](#)

Digitally signed by Roger Kregel DN:cn=Roger Kregel,email=rogerkr@dumonttelephone.com,O=dumont tel. co.,l=Dumont IA 50625, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Roger Kregel](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [641-857-3211](#)

Study Area Code of  
Reporting Carrier:

[351152](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [DUNKERTON TEL. COOP., INC.](#)Signature of authorized officer or employee: [Abbi Kienast](#)

Digitally signed by Abbi Kienast DN:cn=Abbi Kienast,email=abbi@dunkerton.net,O=dunkerton tel. coop.,inc.,l=Dunkerton IA 50626, Date:3/15/2021

Date: [3/15/2021](#).Printed name of authorized officer or employee: [Abbi Kienast](#)Title or position of authorized officer or employee: [General Manager](#)Telephone number of authorized officer or employee: [319-822-4512](#)Study Area Code of  
Reporting Carrier:[351153](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [ELLSWORTH COOP. TEL. ASSN.](#)Signature of authorized officer or employee: [Joshua Angove](#)

Digitally signed by Joshua Angove DN:cn=Joshua Angove,email=jangove@netins.net,O=ellsworth coop. tel. assn.,l=Ellsworth IA 50075-0458, Date:3/19/2021

Date: [3/19/2021](#).Printed name of authorized officer or employee: [Joshua Angove](#)Title or position of authorized officer or employee: [Manager](#)Telephone number of authorized officer or employee: [515-836-4431](#)Study Area Code of  
Reporting Carrier:[351157](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MINBURN TELECOMMUNICATIONS, INC.](#)Signature of authorized officer or employee: [Debra Lucht](#)

Digitally signed by Debra Lucht DN:cn=Debra Lucht,email=debl@minburncomm.com,O=minburn telecommunications, inc.,l=Minburn IA 50167, Date:3/19/2021

Date: [3/19/2021](#).Printed name of authorized officer or employee: [Debra Lucht](#)Title or position of authorized officer or employee: [General Manager/CEO](#)Telephone number of authorized officer or employee: [515-677-2264](#)Study Area Code of  
Reporting Carrier:[351158](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">FARMERS COOP. TEL. CO.-DYSART</a>					
Signature of authorized officer or employee: <a href="#">Shelly Franzenburg</a>				Digitally signed by Shelly Franzenburg DN:cn=Shelly Franzenburg,email=sfranzenburg@fctc.coop,O=farmers coop. tel. co.-dysart,l=Dysart IA 52224-0280, Date:3/15/2021	
Date: <a href="#">3/15/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Shelly Franzenburg</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">319-476-7800</a>					
Study Area Code of Reporting Carrier:	<a href="#">351162</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [FARMERS & MERCHANTS MUTUAL TEL. CO.](#)Signature of authorized officer or employee: [Ray Fear](#)Digitally signed by Ray Fear DN:cn=Ray  
Fear,email=rayfear@farmtel.com,O=farmers & merchants mutual tel.  
co.,l=Wayland IA 52654, Date:3/22/2021Date: [3/22/2021](#).Printed name of authorized officer or employee: [Ray Fear](#)Title or position of authorized officer or employee: [Operations Manager](#)Telephone number of authorized officer or employee: [319-256-2736](#)Study Area Code of  
Reporting Carrier:[351166](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [FARMERS MUTUAL TEL. CO.-NORA SPRINGS](#)Signature of authorized officer or employee: [Josh Hveem](#)

Digitally signed by Josh Hveem DN:cn=Josh Hveem,email=jhveem@omnitel.biz,O=farmers mutual tel. co.-nora springs,l=Truro IA 50257, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Josh Hveem](#)Title or position of authorized officer or employee: [COO](#)Telephone number of authorized officer or employee: [641-765-4201](#)Study Area Code of  
Reporting Carrier:[351172](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">FARMERS MUTUAL TEL. COOP.-SHELLSBURG</a>					
Signature of authorized officer or employee: <a href="#">Curtis Eldred</a>				Digitally signed by Curtis Eldred DN:cn=Curtis Eldred,email=celdred@usacomm.coop,O=farmers mutual tel. coop.-shellsburg,l=Shellsburg IA 52332-0438, Date:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Curtis Eldred</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">319-436-2224</a>					
Study Area Code of Reporting Carrier:	<a href="#">351173</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [FARMERS MUTUAL TELEPHONE CO. OF STANTON, IOWA](#)Signature of authorized officer or employee: [Tim Eklund](#)

Digitally signed by Tim Eklund DN:cn=Tim Eklund,email=teklund@fmtcnet.com,O=farmers mutual telephone co. of stanton, iowa,l=Stanton IA 51573-0220, Date:3/23/2021

Date: [3/23/2021](#).Printed name of authorized officer or employee: [Tim Eklund](#)Title or position of authorized officer or employee: [CFO](#)Telephone number of authorized officer or employee: [712-829-2111](#)Study Area Code of  
Reporting Carrier:[351174](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [FARMERS TEL. CO.-BATAVIA](#)

Signature of authorized officer or employee: [Tracey Hill](#)

Digitally signed by Tracey Hill DN:cn=Tracey Hill,email=thill@mycmtech.com,O=farmers tel. co.-batavia,l=BloomField IA 52537, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Tracey Hill](#)

Title or position of authorized officer or employee: [Regulatory Relations Coordinator](#)

Telephone number of authorized officer or employee: [641-664-2074](#)

Study Area Code of  
Reporting Carrier:

[351175](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [FARMERS TEL. CO.-RICEVILLE](#)Signature of authorized officer or employee: [Josh Hveem](#)Digitally signed by Josh Hveem DN:cn=Josh  
Hveem,email=jhveem@omnitel.biz,O=farmers tel. co.-riceville,l=Truro  
IA 50257, Date:3/22/2021Date: [3/22/2021](#).Printed name of authorized officer or employee: [Josh Hveem](#)Title or position of authorized officer or employee: [COO](#)Telephone number of authorized officer or employee: [641-765-4201](#)Study Area Code of  
Reporting Carrier:[351177](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">GOLDFIELD TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Jacob Berte</a>				Digitally signed by Jacob Berte DN:cn=Jacob Berte,email=jberte@ganiowa.com,O=goldfield tel. co.,l=Goldfield IA 50542, Date:3/17/2021	
Date: <a href="#">3/17/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Jacob Berte</a>					
Title or position of authorized officer or employee: <a href="#">Accountant</a>					
Telephone number of authorized officer or employee: <a href="#">515-825-3766</a>					
Study Area Code of Reporting Carrier:	<a href="#">351188</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GRISWOLD COOP. TEL. CO.](#)

Signature of authorized officer or employee: [Amy McLaren](#)

Digitally signed by Amy McLaren DN:cn=Amy McLaren,email=amym\_gctc@netins.net,O=griswold coop. tel. co.,l=Griswold IA 51535-0640, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Amy McLaren](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [712-778-2121](#)

Study Area Code of  
Reporting Carrier:

[351195](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [HUXLEY COMMUNICATIONS COOPERATIVE](#)

Signature of authorized officer or employee: [Levi Bappe](#)

Digitally signed by Levi Bappe DN:cn=Levi Bappe,email=levi@huxleycommunications.net,O=huxley communications cooperative,|Huxley IA 50124-0036, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Levi Bappe](#)

Title or position of authorized officer or employee: [General Manager and Executive VP](#)

Telephone number of authorized officer or employee: [515-597-2281](#)

Study Area Code of  
Reporting Carrier:

[351205](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [IAMO COMMUNICATIONS, INC.-IA](#)Signature of authorized officer or employee: [Jillinda Thornton](#)

Digitally signed by Jillinda Thornton DN:cn=Jillinda Thornton,email=jthornton@iamo.tel,O=iamo communications, inc.-ia,l=Coin IA 51636-0368, Date:3/17/2021

Date: [3/17/2021](#).Printed name of authorized officer or employee: [Jillinda Thornton](#)Title or position of authorized officer or employee: [Office Manager](#)Telephone number of authorized officer or employee: [712-583-3232](#)Study Area Code of  
Reporting Carrier:[351206](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [FMTC-I35, INC.](#)

Signature of authorized officer or employee: [Josh Hveem](#)

Digitally signed by Josh Hveem DN:cn=Josh Hveem, email=jhveem@omnitel.biz, O=fmtc-i35, inc., I=Truro IA 50257, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Josh Hveem](#)

Title or position of authorized officer or employee: [COO](#)

Telephone number of authorized officer or employee: [641-765-4201](#)

Study Area Code of  
Reporting Carrier:

[351209](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">KALONA COOP. TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Casey Peck</a>				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:3/20/2021	
Date: <a href="#">3/20/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Casey Peck</a>					
Title or position of authorized officer or employee: <a href="#">Chief Financial Officer</a>					
Telephone number of authorized officer or employee: <a href="#">319-656-3668</a>					
Study Area Code of Reporting Carrier:	<a href="#">351214</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [KEYSTONE FRMS. COOP. TEL. CO.](#)

Signature of authorized officer or employee: [Byran Kimm](#)

Digitally signed by Byran Kimm DN:cn=Byran Kimm,email=keystone@netins.net,O=keystone frms. coop. tel. co.,l=Keystone IA 52249-0277, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Byran Kimm](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [319-442-3241](#)

Study Area Code of  
Reporting Carrier:

[351217](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">LA PORTE CITY TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Chris Hopp</a>				Digitally signed by Chris Hopp DN:cn=Chris Hopp,email=chopp@alpinecom.net,O=la porte city tel. co.,l=Elkader IA 52043, Date:3/17/2021	
Date: <a href="#">3/17/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Chris Hopp</a>					
Title or position of authorized officer or employee: <a href="#">Chief Operating Officer</a>					
Telephone number of authorized officer or employee: <a href="#">563-245-4480</a>					
Study Area Code of Reporting Carrier:	<a href="#">351220</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LEHIGH VALLEY COOP. TEL. ASSN.](#)

Signature of authorized officer or employee: [Jim Suchan](#)

Digitally signed by Jim Suchan DN:cn=Jim Suchan,email=jsmgr@lvcta.com,O=lehigh valley coop. tel. assn.,l=Lehigh IA 50557, Date:3/24/2021

Date: [3/24/2021](#).

Printed name of authorized officer or employee: [Jim Suchan](#)

Title or position of authorized officer or employee: [Chief Executive Officer](#)

Telephone number of authorized officer or employee: [515-359-2211](#)

Study Area Code of  
Reporting Carrier:

[351225](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MINBURN TEL. CO.](#)

Signature of authorized officer or employee: [Debra Lucht](#)

Digitally signed by Debra Lucht DN:cn=Debra Lucht,email=debl@minburncomm.com,O=minburn tel. co.,l=Minburn IA 50167, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Debra Lucht](#)

Title or position of authorized officer or employee: [General Manager/CEO](#)

Telephone number of authorized officer or employee: [515-677-2264](#)

Study Area Code of  
Reporting Carrier:

[351245](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MEDIAPOLIS TEL. CO.](#)

Signature of authorized officer or employee: [Angie Rupe](#)

Digitally signed by Angie Rupe DN:cn=Angie  
Rupe,email=arupe@mepotelco.net,O=mediapolis tel. co.,l=Mediapolis  
IA 52637, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Angie Rupe](#)

Title or position of authorized officer or employee: [Office Manager & CFO](#)

Telephone number of authorized officer or employee: [319-394-3456](#)

Study Area Code of  
Reporting Carrier:

[351251](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [OGDEN TEL. CO.-IA](#)

Signature of authorized officer or employee: [James R Heckman](#)

Digitally signed by James R Heckman DN:cn=James R Heckman, email=ogdenteljim@netins.net, O=ogden tel. co.-ia, I=Ogden IA 50212, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [James R Heckman](#)

Title or position of authorized officer or employee: [General Manager / Executive VP](#)

Telephone number of authorized officer or employee: [515-275-2050](#)

Study Area Code of  
Reporting Carrier:

[351263](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">PALO COOPERATIVE TELEPHONE ASSOCIATION</a>					
Signature of authorized officer or employee: <a href="#">Erin Petersen</a>				Digitally signed by Erin Petersen DN:cn=Erin Petersen,email=palomanager@netins.net,O=palo cooperative telephone association,I=Palo IA 52324, Date:3/26/2021	
Date: <a href="#">3/26/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Erin Petersen</a>					
Title or position of authorized officer or employee: <a href="#">CEO/General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">319-851-3431</a>					
Study Area Code of Reporting Carrier:	<a href="#">351269</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [PANORA COMMUNICATIONS COOPERATIVE](#)Signature of authorized officer or employee: [Andrew M. Randol](#)

Digitally signed by Andrew M. Randol DN:cn=Andrew M. Randol,email=andrewrandol@panoratelco.com,O=panora communications cooperative,l=Panora IA 50216, Date:3/15/2021

Date: [3/15/2021](#).Printed name of authorized officer or employee: [Andrew M. Randol](#)Title or position of authorized officer or employee: [Chief Executive Officer](#)Telephone number of authorized officer or employee: [641-755-2424](#)Study Area Code of  
Reporting Carrier:[351271](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">PRAIRIEBURG TEL. CO., INC.</a>					
Signature of authorized officer or employee: <a href="#">LaRae Reichenauer</a>				Digitally signed by LaRae Reichenauer DN:cn=LaRae Reichenauer,email=prbgtele@netins.net,O=prairieburg tel. co.,inc.,l=Prairieburg IA 52219-8826, Date:3/22/2021	
Date: <a href="#">3/22/2021.</a>					
Printed name of authorized officer or employee: <a href="#">LaRae Reichenauer</a>					
Title or position of authorized officer or employee: <a href="#">Secretary/Treasurer</a>					
Telephone number of authorized officer or employee: <a href="#">319-437-3611</a>					
Study Area Code of Reporting Carrier:	<a href="#">351275</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [PRESTON TEL. CO.](#)

Signature of authorized officer or employee: [MaryBeth Heister](#)

Digitally signed by MaryBeth Heister DN:cn=MaryBeth Heister,email=rogerak@prestontel.com,O=preston tel. co.,l=Preston IA 52069-0167, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [MaryBeth Heister](#)

Title or position of authorized officer or employee: [Secretary-Treasurer](#)

Telephone number of authorized officer or employee: [563-689-3811](#)

Study Area Code of  
Reporting Carrier:

[351276](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [RINGSTED TEL. CO.](#)

Signature of authorized officer or employee: [Aaron McCartan](#)

Digitally signed by Aaron McCartan DN:cn=Aaron McCartan,email=aaron@ringtelco.com,O=ringsted tel. co.,l=Ringsted IA 50578, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Aaron McCartan](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [712-866-8000](#)

Study Area Code of  
Reporting Carrier:

[351280](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [ROYAL TEL. CO.](#)Signature of authorized officer or employee: [John Noah](#)Digitally signed by John Noah DN:cn=John  
Noah,email=jnoah@royaltelco.com,O=royal tel. co.,l=Royal IA 51357,  
Date:3/24/2021Date: [3/24/2021](#).Printed name of authorized officer or employee: [John Noah](#)Title or position of authorized officer or employee: [General Manager/CCO](#)Telephone number of authorized officer or employee: [712-933-2615](#)Study Area Code of  
Reporting Carrier:[351283](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SHARON TEL. CO.](#)

Signature of authorized officer or employee: [Michelle Teran](#)

Digitally signed by Michelle Teran DN:cn=Michelle Teran,email=stc@sharontc.net,O=sharon tel. co.,l=Hills IA 52235,  
Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Michelle Teran](#)

Title or position of authorized officer or employee: [Sharon Telephone Company](#)

Telephone number of authorized officer or employee: [319-679-2211](#)

Study Area Code of  
Reporting Carrier:

[351293](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SOUTH SLOPE COOP. TEL. CO.](#)

Signature of authorized officer or employee: [Chuck Deisbeck](#)

Digitally signed by Chuck Deisbeck DN:cn=Chuck Deisbeck,email=chuck.deisbeck@southslope.com,O=south slope coop. tel. co.,l=North Liberty IA 52317, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Chuck Deisbeck](#)

Title or position of authorized officer or employee: [CEO](#)

Telephone number of authorized officer or employee: [319-626-2211](#)

Study Area Code of  
Reporting Carrier:

[351298](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">FMTC-I35, INC. (SWT)</a>					
Signature of authorized officer or employee: <a href="#">Josh Hveem</a>				Digitally signed by Josh Hveem DN:cn=Josh Hveem,email=jhveem@omnitel.biz,O=fmtc-i35, inc. (swt),l=Truro IA 50257, Date:3/22/2021	
Date: <a href="#">3/22/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Josh Hveem</a>					
Title or position of authorized officer or employee: <a href="#">COO</a>					
Telephone number of authorized officer or employee: <a href="#">641-765-4201</a>					
Study Area Code of Reporting Carrier:	<a href="#">351301</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [SPRINGVILLE COOP. TEL. ASSN.](#)Signature of authorized officer or employee: [Jean Schilling](#)

Digitally signed by Jean Schilling DN:cn=Jean Schilling,email=springvl@netins.net,O=Springville coop. tel. assn.,l=Springville IA 52336-0009, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Jean Schilling](#)Title or position of authorized officer or employee: [Office Manager](#)Telephone number of authorized officer or employee: [319-854-6107](#)Study Area Code of  
Reporting Carrier:[351302](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [SOUTH SLOPE COOP TEL CO-SWISHER](#)Signature of authorized officer or employee: [Chuck Deisbeck](#)Digitally signed by Chuck Deisbeck DN:cn=Chuck  
Deisbeck,email=chuck.deisbeck@southslope.com,O=south slope  
coop tel co-swisher,l=North Liberty IA 52317, Date:3/18/2021Date: [3/18/2021](#).Printed name of authorized officer or employee: [Chuck Deisbeck](#)Title or position of authorized officer or employee: [CEO](#)Telephone number of authorized officer or employee: [319-626-2211](#)Study Area Code of  
Reporting Carrier:[351304](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">STRATFORD MUTUAL TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Jen Frank</a>				Digitally signed by Jen Frank DN:cn=Jen Frank,email=jfrank@stratfordtelephone.com,O=stratford mutual tel. co.,l=Stratford IA 50249, Date:3/25/2021	
Date: <a href="#">3/25/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Jen Frank</a>					
Title or position of authorized officer or employee: <a href="#">Assistant Secretary/Office Manager</a>					
Telephone number of authorized officer or employee: <a href="#">515-838-2390</a>					
Study Area Code of Reporting Carrier:	<a href="#">351305</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">UNITED FARMERS TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Roxanne White</a>				Digitally signed by Roxanne White DN:cn=Roxanne White,email=rwhite@evertek.net,O=united farmers tel. co.,l=Everly IA 51338, Date:3/17/2021	
Date: <a href="#">3/17/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Roxanne White</a>					
Title or position of authorized officer or employee: <a href="#">Executive Vice President</a>					
Telephone number of authorized officer or employee: <a href="#">712-834-2211</a>					
Study Area Code of Reporting Carrier:	<a href="#">351316</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [VAN HORNE COOP. TEL. CO.](#)

Signature of authorized officer or employee: [Kerry Less](#)

Digitally signed by Kerry Less DN:cn=Kerry Less,email=canary@netins.net,O=van horne coop. tel. co.,l=Van Horne IA 52346-0096, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Kerry Less](#)

Title or position of authorized officer or employee: [CFO - Chief Financial Officer](#)

Telephone number of authorized officer or employee: [319-228-8791](#)

Study Area Code of  
Reporting Carrier:

[351320](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">VENTURA TEL. CO., INC.</a>					
Signature of authorized officer or employee: <a href="#">Thomas Lovell</a>				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:3/18/2021	
Date: <a href="#">3/18/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Thomas Lovell</a>					
Title or position of authorized officer or employee: <a href="#">General Manager/Vice President</a>					
Telephone number of authorized officer or employee: <a href="#">641-357-2111</a>					
Study Area Code of Reporting Carrier:	<a href="#">351322</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">WELLMAN COOP. TEL. ASSN.</a>					
Signature of authorized officer or employee: <a href="#">Jayne S. Hochstedler</a>				Digitally signed by Jayne S. Hochstedler DN:cn=Jayne S. Hochstedler, email=jayne.h@wellmantelephone.com,O=wellman coop. tel. assn.,l=Wellman IA 52356-0170, Date:3/17/2021	
Date: <a href="#">3/17/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Jayne S. Hochstedler</a>					
Title or position of authorized officer or employee: <a href="#">CFO</a>					
Telephone number of authorized officer or employee: <a href="#">319-646-6075</a>					
Study Area Code of Reporting Carrier:	<a href="#">351329</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">WEST LIBERTY TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Jerry S. Melick</a>				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:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Jerry S. Melick</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">319-627-2145</a>					
Study Area Code of Reporting Carrier:	<a href="#">351332</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [WILTON TEL. CO.](#)

Signature of authorized officer or employee: [Mark Peterson](#)

Digitally signed by Mark Peterson DN:cn=Mark Peterson,email=mwp@wtccommunications.com,O=wilton tel. co.,l=Wilton IA 52778-0970, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Mark Peterson](#)

Title or position of authorized officer or employee: [President/CEO](#)

Telephone number of authorized officer or employee: [563-732-3000](#)

Study Area Code of  
Reporting Carrier:

[351336](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">ACE TEL. ASSN.-MN</a>					
Signature of authorized officer or employee: <a href="#">Cynthia Sweet</a>				Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace tel. assn.-mn,l=Houston MN 55943-0360, Date:3/23/2021	
Date: <a href="#">3/23/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Cynthia Sweet</a>					
Title or position of authorized officer or employee: <a href="#">Controller</a>					
Telephone number of authorized officer or employee: <a href="#">507-896-6211</a>					
Study Area Code of Reporting Carrier:	<a href="#">361346</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">CITY OF BARNESVILLE TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Guy Swenson</a>				Digitally signed by Guy Swenson DN:cn=Guy Swenson,email=tecmanager@barnesvillemn.com,O=city of barnesville tel. co.,l=Barnesville MN 56514, Date:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Guy Swenson</a>					
Title or position of authorized officer or employee: <a href="#">TEC Manager</a>					
Telephone number of authorized officer or employee: <a href="#">218-354-2292</a>					
Study Area Code of Reporting Carrier:	<a href="#">361353</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CONSOLIDATED TEL. CO.-MN](#)

Signature of authorized officer or employee: [Mark N. Roach](#)

Digitally signed by Mark N. Roach DN:cn=Mark N. Roach,email=mark.roach@ctctelcom.net,O=consolidated tel. co.-mn,l=Brainerd MN 56401-0972, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Mark N. Roach](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [218-454-1104](#)

Study Area Code of  
Reporting Carrier:

[361373](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">EMILY COOP. TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Josh Netland</a>				Digitally signed by Josh Netland DN:cn=Josh Netland,email=jnetland@emily.net,O=emily coop. tel. co.,l=Emily MN 56447, Date:3/19/2021	
Date: <a href="#">3/19/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Josh Netland</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">218-763-3000</a>					
Study Area Code of Reporting Carrier:	<a href="#">361387</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MANCHESTER-HARTLAND TELEPHONE CO.](#)

Signature of authorized officer or employee: [Cory Hoerler](#)

Digitally signed by Cory Hoerler DN:cn=Cory  
Hoerler,email=choerler@mhtele.com,O=manchester-hartland  
telephone co.,l=Manchester MN 56007, Date:3/19/2021

Date: [3/19/2021](#).

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](#)

Study Area Code of  
Reporting Carrier:

[361426](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SCOTT RICE TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Curt Kawlewski](#)

Digitally signed by Curt Kawlewski DN:cn=Curt  
Kawlewski,email=curtkawlewski@nu-telecom.net,O=scott rice  
telephone company,|New Ulm MN 56073, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Curt Kawlewski](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [507-233-4172](#)

Study Area Code of  
Reporting Carrier:

[361479](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [TRI-CO TECHNOLOGIES, LLC DBA CROSSLAKE COMM.](#)

Signature of authorized officer or employee: [Josh Netland](#)

Digitally signed by Josh Netland DN:cn=Josh Netland,email=jnetland@emily.net,O=tri-co technologies, llc dba crosslake comm.,l=Emily MN 56447, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Josh Netland](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [218-763-3000](#)

Study Area Code of  
Reporting Carrier:

[361499](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">THREE RIVER TELCO</a>					
Signature of authorized officer or employee: <a href="#">Steven Dorf</a>				Digitally signed by Steven Dorf DN:cn=Steven Dorf,email=sdorf@threerivertelco.com,O=three river telco,l=Lynch NE 68746-0066, Date:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Steven Dorf</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">402-569-2666</a>					
Study Area Code of Reporting Carrier:	<a href="#">371525</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CAMBRIDGE TELEPHONE COMPANY - NE](#)

Signature of authorized officer or employee: [J. Thomas Shoemaker](#)

Digitally signed by J. Thomas Shoemaker DN:cn=J. Thomas Shoemaker,email=tom.shoemaker@pnpt.com,O=cambridge telephone company - ne,l=Cambridge NE 69022, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [J. Thomas Shoemaker](#)

Title or position of authorized officer or employee: [V P Regulatory Affairs](#)

Telephone number of authorized officer or employee: [308-697-3333](#)

Study Area Code of  
Reporting Carrier:

[371526](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [COZAD TELEPHONE COMPANY](#)Signature of authorized officer or employee: [Marcus D. Young](#)

Digitally signed by Marcus D. Young DN:cn=Marcus D. Young,email=myoung.ctc@cozadtel.net,O=cozad telephone company,l=Cozad NE 69130, Date:3/19/2021

Date: [3/19/2021](#).Printed name of authorized officer or employee: [Marcus D. Young](#)Title or position of authorized officer or employee: [President](#)Telephone number of authorized officer or employee: [308-784-4044](#)Study Area Code of  
Reporting Carrier:[371534](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">DILLER TELEPHONE COMPANY</a>					
Signature of authorized officer or employee: <a href="#">Loren Duerksen</a>				Digitally signed by Loren Duerksen DN:cn=Loren Duerksen,email=lorend@diodecom.net,O=diller telephone company,I=Diller NE 68343, Date:3/17/2021	
Date: <a href="#">3/17/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Loren Duerksen</a>					
Title or position of authorized officer or employee: <a href="#">General Manager/Director of Operations</a>					
Telephone number of authorized officer or employee: <a href="#">402-793-5330</a>					
Study Area Code of Reporting Carrier:	<a href="#">371540</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [GLENWOOD TELEPHONE MEMBERSHIP CORP.](#)Signature of authorized officer or employee: [Stanley Rouse](#)

Digitally signed by Stanley Rouse DN:cn=Stanley Rouse,email=manager@glenwoodtelco.net,O=glenwood telephone membership corp.,l=Blue Hill NE 68930, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Stanley Rouse](#)Title or position of authorized officer or employee: [CEO/General Manager](#)Telephone number of authorized officer or employee: [402-756-3131](#)Study Area Code of  
Reporting Carrier:[371553](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [HARTINGTON TELECOMMUNICATIONS CO., INC.](#)

Signature of authorized officer or employee: [Dave Nilles](#)

Digitally signed by Dave Nilles DN:cn=Dave  
Nilles,email=dnilles@hartel.net,O=hartington telecommunications co.,  
inc.,l=Hartington NE 68739-0157, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Dave Nilles](#)

Title or position of authorized officer or employee: [CFO/ General Manager](#)

Telephone number of authorized officer or employee: [402-254-3901](#)

Study Area Code of  
Reporting Carrier:

[371556](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [HARTMAN TELEPHONE EXCHANGES INC.](#)

Signature of authorized officer or employee: [Linda McKain](#)

Digitally signed by Linda McKain DN:cn=Linda McKain,email=lmckain@bwtelcom.net,O=hartman telephone exchanges inc.,l=Benkelman NE 69021, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Linda McKain](#)

Title or position of authorized officer or employee: [Secretary](#)

Telephone number of authorized officer or employee: [308-423-5607](#)

Study Area Code of  
Reporting Carrier:

[371557](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">HEMINGFORD COOP. TELEPHONE COMPANY</a>					
Signature of authorized officer or employee: <a href="#">Tonya Mayer</a>				Digitally signed by Tonya Mayer DN:cn=Tonya Mayer,email=tonya@bbc.net,O=hemingford coop. telephone company,l=Hemingford NE 69348-0246, Date:3/22/2021	
Date: <a href="#">3/22/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Tonya Mayer</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">308-487-3311</a>					
Study Area Code of Reporting Carrier:	<a href="#">371558</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [HENDERSON CO-OP TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Chris Johnson](#)

Digitally signed by Chris Johnson DN:cn=Chris Johnson,email=cjohnson@mainstaycomm.net,O=henderson co-op telephone company,l=Henderson NE 68371, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Chris Johnson](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [402-723-4448](#)

Study Area Code of  
Reporting Carrier:

[371559](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [HERSHEY COOPERATIVE TELEPHONE CO](#)

Signature of authorized officer or employee: [Rex Woolley](#)

Digitally signed by Rex Woolley DN:cn=Rex Woolley,email=rwoolley@hersheytel.net,O=hershey cooperative telephone co,l=Hershey NE 69143, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Rex Woolley](#)

Title or position of authorized officer or employee: [General Manager & CEO](#)

Telephone number of authorized officer or employee: [308-368-5561](#)

Study Area Code of  
Reporting Carrier:

[371561](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GLENWOOD NETWORK SERVICES, INC.](#)

Signature of authorized officer or employee: [Stanley Rouse](#)

Digitally signed by Stanley Rouse DN:cn=Stanley Rouse,email=manager@glenwoodtelco.net,O=glenwood network services, inc.,l=Blue Hill NE 68930, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Stanley Rouse](#)

Title or position of authorized officer or employee: [CEO/General Manager](#)

Telephone number of authorized officer or employee: [402-756-3131](#)

Study Area Code of  
Reporting Carrier:

[371567](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [PLAINVIEW TELEPHONE COMPANY INC.](#)

Signature of authorized officer or employee: [Grant Dummer](#)

Digitally signed by Grant Dummer DN:cn=Grant Dummer,email=gddummer@plvwtelco.net,O=plainview telephone company inc.,l=Plainview NE 68769-0117, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Grant Dummer](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [402-582-4242](#)

Study Area Code of  
Reporting Carrier:

[371582](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SOUTHEAST NEBRASKA COMMUNICATIONS, INC.](#)

Signature of authorized officer or employee: [Ray Joy](#)

Digitally signed by Ray Joy DN:cn=Ray Joy,email=ray@sentco.net,O=southeast nebraska communications, inc.,l=Falls City NE 68355, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Ray Joy](#)

Title or position of authorized officer or employee: [Vice President](#)

Telephone number of authorized officer or employee: [402-245-4451](#)

Study Area Code of  
Reporting Carrier:

[371591](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [STANTON TELECOM INC.](#)Signature of authorized officer or employee: [Nicholas Kelly Paden](#)

Digitally signed by Nicholas Kelly Paden DN:cn=Nicholas Kelly Paden,email=npaden@stanton.net,O=stanton telecom inc.,l=Stanton NE 68779, Date:3/23/2021

Date: [3/23/2021](#).Printed name of authorized officer or employee: [Nicholas Kelly Paden](#)Title or position of authorized officer or employee: [Vice President/General Manager](#)Telephone number of authorized officer or employee: [402-439-2264](#)Study Area Code of  
Reporting Carrier:[371592](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [WAUNETA TEL. CO.](#)

Signature of authorized officer or employee: [Linda McKain](#)

Digitally signed by Linda McKain DN:cn=Linda McKain,email=lmckain@bwtelcom.net,O=wauneta tel. co.,l=Benkelman NE 69021, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Linda McKain](#)

Title or position of authorized officer or employee: [Secretary](#)

Telephone number of authorized officer or employee: [308-423-5607](#)

Study Area Code of  
Reporting Carrier:

[371597](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">BENKELMAN TELEPHONE COMPANY INC.</a>					
Signature of authorized officer or employee: <a href="#">Linda McKain</a>				Digitally signed by Linda McKain DN:cn=Linda McKain,email=lmckain@bwtelcom.net,O=benkelman telephone company inc.,l=Benkelman NE 69021, Date:3/17/2021	
Date: <a href="#">3/17/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Linda McKain</a>					
Title or position of authorized officer or employee: <a href="#">Secretary</a>					
Telephone number of authorized officer or employee: <a href="#">308-423-5607</a>					
Study Area Code of Reporting Carrier:	<a href="#">372455</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [CONSOLIDATED TELCOM](#)Signature of authorized officer or employee: [Ken Weisenberger](#)

Digitally signed by Ken Weisenberger DN:cn=Ken Weisenberger, email=ken@consolidatedTelcom.com, O=consolidated telcom, l=Dickinson ND 58601, Date:3/17/2021

Date: [3/17/2021](#).Printed name of authorized officer or employee: [Ken Weisenberger](#)Title or position of authorized officer or employee: [Chief Financial Officer](#)Telephone number of authorized officer or employee: [701-483-7376](#)Study Area Code of  
Reporting Carrier:[381607](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MIDSTATE TELEPHONE COMPANY](#)Signature of authorized officer or employee: [Ryan Wilhelmi](#)Digitally signed by Ryan Wilhelmi DN:cn=Ryan  
Wilhelmi,email=ryanw@midstate.net,O=midstate telephone  
company,l=Stanley ND 58784-0400, Date:3/26/2021Date: [3/26/2021](#).Printed name of authorized officer or employee: [Ryan Wilhelmi](#)Title or position of authorized officer or employee: [General Manager](#)Telephone number of authorized officer or employee: [701-628-2522](#)Study Area Code of  
Reporting Carrier:[381617](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [NORTHWEST COMMUNICATIONS COOPERATIVE](#)

Signature of authorized officer or employee: [Jennifer Bingeman](#)

Digitally signed by Jennifer Bingeman DN:cn=Jennifer Bingeman,email=jenb@nccray.com,O=northwest communications cooperative,l=Ray ND 58849, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Jennifer Bingeman](#)

Title or position of authorized officer or employee: [CFO](#)

Telephone number of authorized officer or employee: [701-568-8101](#)

Study Area Code of  
Reporting Carrier:

[381625](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">RESERVATION TELEPHONE COOPERATIVE</a>					
Signature of authorized officer or employee: <a href="#">Shane Hart</a>				Digitally signed by Shane Hart DN:cn=Shane Hart,email=shaneh@rtc.email,O=reservation telephone cooperative,l=Parshall ND 58770-0068, Date:3/18/2021	
Date: <a href="#">3/18/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Shane Hart</a>					
Title or position of authorized officer or employee: <a href="#">CEO/ General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">701-862-3115</a>					
Study Area Code of Reporting Carrier:	<a href="#">381632</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WEST RIVER TELECOMMUNICATIONS COOPERATIVE](#)Signature of authorized officer or employee: [Troy Schilling](#)

Digitally signed by Troy Schilling DN:cn=Troy Schilling,email=troys@wrtc.com,O=west river telecommunications cooperative,l=Hazen ND 58545, Date:3/15/2021

Date: [3/15/2021](#).Printed name of authorized officer or employee: [Troy Schilling](#)Title or position of authorized officer or employee: [CEO/General Manager](#)Telephone number of authorized officer or employee: [701-748-2211](#)Study Area Code of  
Reporting Carrier:[381637](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MIDSTATE COMMUNICATIONS INC.](#)Signature of authorized officer or employee: [Ryan Wilhelmi](#)Digitally signed by Ryan Wilhelmi DN:cn=Ryan  
Wilhelmi,email=ryanw@midstate.net,O=midstate communications  
inc.,l=Stanley ND 58784-0400, Date:3/26/2021Date: [3/26/2021](#).Printed name of authorized officer or employee: [Ryan Wilhelmi](#)Title or position of authorized officer or employee: [General Manager](#)Telephone number of authorized officer or employee: [701-628-2522](#)Study Area Code of  
Reporting Carrier:[381638](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SRT COMMUNICATIONS, INC.](#)

Signature of authorized officer or employee: [Julie Lizotte](#)

Digitally signed by Julie Lizotte DN:cn=Julie  
Lizotte,email=julieel@srttel.com,O=srt communications, inc.,l=Minot  
ND 58702-2027, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Julie Lizotte](#)

Title or position of authorized officer or employee: [Director of Regulatory Affairs](#)

Telephone number of authorized officer or employee: [701-858-5233](#)

Study Area Code of  
Reporting Carrier:

[383303](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CHEYENNE RIVER SIOUX TRIBAL TEL AUTH](#)

Signature of authorized officer or employee: [Mona L Thompson](#)

Digitally signed by Mona L Thompson DN:cn=Mona L Thompson,email=monat@lakotanetwork.com,O=cheyenne river sioux tribal tel auth,l=Eagle Butte SD 57625, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Mona L Thompson](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [605-964-2600](#)

Study Area Code of  
Reporting Carrier:

[391647](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BERESFORD MUNICIPAL TEL. CO.](#)

Signature of authorized officer or employee: [Beth Rasmussen](#)

Digitally signed by Beth Rasmussen DN:cn=Beth Rasmussen,email=bethr@bmtc.net,O=beresford municipal tel. co.,l=Beresford SD 57004, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Beth Rasmussen](#)

Title or position of authorized officer or employee: [General Manager Assistant](#)

Telephone number of authorized officer or employee: [605-763-2500](#)

Study Area Code of  
Reporting Carrier:

[391649](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [CITY OF BROOKINGS MUNICIPAL TEL. DEPT.](#)Signature of authorized officer or employee: [Laura Julius](#)

Digitally signed by Laura Julius DN:cn=Laura Julius,email=ljulius@swiftel-bmu.com,O=city of brookings municipal tel. dept.,l=Brookings SD 57006, Date:3/18/2021

Date: [3/18/2021](#).Printed name of authorized officer or employee: [Laura Julius](#)Title or position of authorized officer or employee: [Finance & Accounting Manager](#)Telephone number of authorized officer or employee: [605-692-6325](#)Study Area Code of  
Reporting Carrier:[391650](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CITY OF FAITH MUNICIPAL TEL CO](#)

Signature of authorized officer or employee: [Debbie Brown](#)

Digitally signed by Debbie Brown DN:cn=Debbie Brown,email=faihth@faihthsd.com,O=city of faith municipal tel co,I=faihth SD 57626-0368, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Debbie Brown](#)

Title or position of authorized officer or employee: [Finance Officer](#)

Telephone number of authorized officer or employee: [605-967-2261](#)

Study Area Code of  
Reporting Carrier:

[391653](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [JEFFERSON TELEPHONE COMPANY - SD](#)Signature of authorized officer or employee: [Tom Connors](#)Digitally signed by Tom Connors DN:cn=Tom  
Connors,email=tomc@longlines.biz,O=jefferson telephone company -  
sd,l=Jefferson SD 57038-0128, Date:3/26/2021Date: [3/26/2021](#).Printed name of authorized officer or employee: [Tom Connors](#)Title or position of authorized officer or employee: [Manager](#)Telephone number of authorized officer or employee: [605-966-5631](#)Study Area Code of  
Reporting Carrier:[391666](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">KENNEBEC TELEPHONE COMPANY</a>					
Signature of authorized officer or employee: <a href="#">Rod Bowar</a>				Digitally signed by Rod Bowar DN:cn=Rod Bowar,email=rodb@kennebectelephone.com,O=kennebec telephone company,l=Kennebec SD 57544, Date:3/24/2021	
Date: <a href="#">3/24/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Rod Bowar</a>					
Title or position of authorized officer or employee: <a href="#">President/Manager</a>					
Telephone number of authorized officer or employee: <a href="#">605-869-2220</a>					
Study Area Code of Reporting Carrier:	<a href="#">391668</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WEST RIVER TELECOMMUNICATIONS COOP.\(MOBRIDGE\)](#)Signature of authorized officer or employee: [Troy Schilling](#)

Digitally signed by Troy Schilling DN:cn=Troy Schilling,email=troys@wrtc.com,O=west river telecommunications coop.(mobridge),l=Hazen ND 58545, Date:3/15/2021

Date: [3/15/2021](#).Printed name of authorized officer or employee: [Troy Schilling](#)Title or position of authorized officer or employee: [CEO/General Manager](#)Telephone number of authorized officer or employee: [701-748-2211](#)Study Area Code of  
Reporting Carrier:[391671](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

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

**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>RC Technologies</u>			
Signature of authorized officer or employee <u>Robin Thoreson</u>			Date <u>3/24/21</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</u> ) <u>637</u> - <u>5211</u> , ext.			
Study Area Code of Reporting Carrier	<u>391674</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2021</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SANTEL COMMUNICATIONS COOPERATIVE, INC.](#)

Signature of authorized officer or employee: [Ryan Thompson](#)

Digitally signed by Ryan Thompson DN:cn=Ryan Thompson,email=rthompson@santel.coop,O=santel communications cooperative, inc.,l=Woonsocket SD 57385-0067, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Ryan Thompson](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [605-796-8143](#)

Study Area Code of  
Reporting Carrier:

[391676](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [VALLEY TELECOMM. COOP. ASSN., INC.](#)

Signature of authorized officer or employee: [Jeff Symens](#)

Digitally signed by Jeff Symens DN:cn=Jeff Symens, email=jeff.s@valleytel.coop, O=valley telecomm. coop. assn., inc., l=Herreid SD 57632-0007, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Jeff Symens](#)

Title or position of authorized officer or employee: [General Manager/CEO](#)

Telephone number of authorized officer or employee: [605-437-2615](#)

Study Area Code of  
Reporting Carrier:

[391685](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">CENTRAL ARKANSAS TEL. COOP INC.</a>					
Signature of authorized officer or employee: <a href="#">Larry D Frazier</a>				Digitally signed by Larry D Frazier DN:cn=Larry D Frazier,email=larryf@catc.net,O=central arkansas tel. coop inc.,l=Bismarck AR 71929, Date:3/19/2021	
Date: <a href="#">3/19/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Larry D Frazier</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">501-865-7008</a>					
Study Area Code of Reporting Carrier:	<a href="#">401697</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CLEVELAND CTY TEL. CO.](#)

Signature of authorized officer or employee: [Wendy Ottman](#)

Digitally signed by Wendy Ottman DN:cn=Wendy Ottman,email=wendy@missouricom.co,O=cleveland cty tel. co.,l=Oregon MO 64473, Date:3/21/2021

Date: [3/21/2021](#).

Printed name of authorized officer or employee: [Wendy Ottman](#)

Title or position of authorized officer or employee: [Vice President of Finance](#)

Telephone number of authorized officer or employee: [573-835-4051](#)

Study Area Code of  
Reporting Carrier:

[401698](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [DECATUR TELEPHONE CO INC- ARKANSAS](#)

Signature of authorized officer or employee: [Wendy Ottman](#)

Digitally signed by Wendy Ottman DN:cn=Wendy Ottman,email=wendy@missouricom.co,O=decatur telephone co inc-arkansas,l=Oregon MO 64473, Date:3/21/2021

Date: [3/21/2021](#).

Printed name of authorized officer or employee: [Wendy Ottman](#)

Title or position of authorized officer or employee: [Vice President of Finance](#)

Telephone number of authorized officer or employee: [573-835-4051](#)

Study Area Code of  
Reporting Carrier:

[401699](#)

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

[03/31/2021](#)

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

**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>LAVACA - Arkansas</u>			
Signature of authorized officer or employee <u>Trent L Force</u>			Date <u>3-24-21</u>
Printed name of authorized officer or employee <u>Trent L Force</u>			
Title or position of authorized officer or employee <u>CFO</u>			
Telephone number of authorized officer or employee: <u>(405) 242 - 0336</u> , ext.			
Study Area Code of Reporting Carrier <u>401704</u>	Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2021</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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. 1635

**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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MADISON COUNTY TEL. CO. INC.](#)

Signature of authorized officer or employee: [Tom S. Shrum](#)

Digitally signed by Tom S. Shrum DN:cn=Tom S. Shrum, email=tomshrum@madisoncounty.net, O=madison county tel. co. inc., l=Huntsville AR 72740, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Tom S. Shrum](#)

Title or position of authorized officer or employee: [Secretary/Treasurer](#)

Telephone number of authorized officer or employee: [479-738-2121](#)

Study Area Code of  
Reporting Carrier:

[401709](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">NORTHERN ARKANSAS TEL. CO., INC.</a>					
Signature of authorized officer or employee: <a href="#">Denise Russell</a>				<small>Digitally signed by Denise Russell DN:cn=Denise Russell, email=drussell@natconet.com, O=northern arkansas tel. co., inc., l=Chattaroy WA 99003, Date:3/25/2021</small>	
Date: <a href="#">3/25/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Denise Russell</a>					
Title or position of authorized officer or employee: <a href="#">Director of Regulatory Affairs</a>					
Telephone number of authorized officer or employee: <a href="#">509-238-2961</a>					
Study Area Code of Reporting Carrier:	<a href="#">401713</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [PRAIRIE GROVE TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Rick Reed](#)

Digitally signed by Rick Reed DN:cn=Rick  
Reed,email=treed@pgtc.com,O=prairie grove telephone  
company,l=Prairie Grove AR 72753-1010, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Rick Reed](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [479-846-7227](#)

Study Area Code of  
Reporting Carrier:

[401718](#)

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

[03/31/2021](#)

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

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>Rice Belt Telephone Company Inc.</b>			
Signature of authorized officer or employee 			Date <b>03/12/2021</b>
Printed name of authorized officer or employee <b>Darby A. McCarty</b>			
Title or position of authorized officer or employee <b>President</b>			
Telephone number of authorized officer or employee: ( 812 ) 876 - 2211 , ext.			
Study Area Code of Reporting Carrier <b>401721</b>		Filing Due Date for this form (mm/dd/yyyy) <b>3/31/2021</b>	
<small>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</small>			

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

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SOUTHWEST ARKANSAS TEL. COOP. INC.](#)

Signature of authorized officer or employee: [Sherri Knigge](#)

Digitally signed by Sherri Knigge DN:cn=Sherri Knigge,email=sherrik@swatco.com,O=southwest arkansas tel. coop. inc.,l=Texarkana AR 71854-8073, Date:3/24/2021

Date: [3/24/2021](#).

Printed name of authorized officer or employee: [Sherri Knigge](#)

Title or position of authorized officer or employee: [Compliance Officer/Accountant](#)

Telephone number of authorized officer or employee: [870-653-8222](#)

Study Area Code of  
Reporting Carrier:

[401724](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [BLUE VALLEY TELE-COMMUNICATIONS, INC.](#)Signature of authorized officer or employee: [Candace Wright](#)

Digitally signed by Candace Wright DN:cn=Candace Wright,email=cwright@bluevalleyinc.net,O=blue valley tele-communications, inc.,l=Home KS 66438, Date:3/25/2021

Date: [3/25/2021](#).Printed name of authorized officer or employee: [Candace Wright](#)Title or position of authorized officer or employee: [GM/CEO](#)Telephone number of authorized officer or employee: [785-799-3657](#)Study Area Code of  
Reporting Carrier:[411746](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [COUNCIL GROVE TEL. CO.](#)

Signature of authorized officer or employee: [Dale L. Jones](#)

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:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Dale L. Jones](#)

Title or position of authorized officer or employee: [CEO](#)

Telephone number of authorized officer or employee: [620-767-5153](#)

Study Area Code of  
Reporting Carrier:

[411758](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CUNNINGHAM TELEPHONE CO. INC.](#)

Signature of authorized officer or employee: [Brent Cunningham](#)

Digitally signed by Brent Cunningham DN:cn=Brent Cunningham,email=brent@ctctelephony.tv,O=cunningham telephone co. inc.,l=Glen Elder KS 67446-0108, Date:3/20/2021

Date: [3/20/2021](#).

Printed name of authorized officer or employee: [Brent Cunningham](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [785-545-3215](#)

Study Area Code of  
Reporting Carrier:

[411761](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">ELKHART TELEPHONE COMPANY INC.</a>					
Signature of authorized officer or employee: <a href="#">Becky Scott</a>				Digitally signed by Becky Scott DN:cn=Becky Scott,email=bscott@epictouch.com,O=elkhart telephone company inc.,l=Elkhart KS 67950, Date:3/22/2021	
Date: <a href="#">3/22/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Becky Scott</a>					
Title or position of authorized officer or employee: <a href="#">President &amp; CFO</a>					
Telephone number of authorized officer or employee: <a href="#">620-697-2111</a>					
Study Area Code of Reporting Carrier:	<a href="#">411764</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GOLDEN BELT TELEPHONE ASSN. INC.](#)

Signature of authorized officer or employee: [Beau D. Rebel](#)

Digitally signed by Beau D. Rebel DN:cn=Beau D. Rebel,email=brebel@gbtlive.com,O=golden belt telephone assn. inc.,l=Rush Center KS 67575, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Beau D. Rebel](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [785-372-4236](#)

Study Area Code of  
Reporting Carrier:

[411777](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GORHAM TELEPHONE COMPANY INC.](#)

Signature of authorized officer or employee: [Tonya Murphy](#)

Digitally signed by Tonya Murphy DN:cn=Tonya Murphy,email=tmurphy@gorhamtel.com,O=gorham telephone company inc.,l=Gorham KS 67640-0235, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Tonya Murphy](#)

Title or position of authorized officer or employee: [Secretary/Treasurer](#)

Telephone number of authorized officer or employee: [785-637-5300](#)

Study Area Code of  
Reporting Carrier:

[411778](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [HOME TELEPHONE COMPANY INC.](#)

Signature of authorized officer or employee: [Tina Anderson](#)

Digitally signed by Tina Anderson DN:cn=Tina Anderson,email=tanderson@hci-ks.com,O=home telephone company inc.,l=Galva KS 67443, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Tina Anderson](#)

Title or position of authorized officer or employee: [Customer Acct & Billing Mgr/Secretary](#)

Telephone number of authorized officer or employee: [620-654-3381](#)

Study Area Code of  
Reporting Carrier:

[411782](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [KANOKLA TELEPHONE ASSOCIATION - KS](#)Signature of authorized officer or employee: [Jill Kuehny](#)

Digitally signed by Jill Kuehny DN:cn=Jill Kuehny,email=jkuehny@kanokla.com,O=kanokla telephone association - ks,l=Caldwell KS 67022-0111, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Jill Kuehny](#)Title or position of authorized officer or employee: [Chief Executive Officer](#)Telephone number of authorized officer or employee: [620-845-5682](#)Study Area Code of  
Reporting Carrier:[411788](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MADISON TELEPHONE, LLC](#)Signature of authorized officer or employee: [Shana Rains](#)

Digitally signed by Shana Rains DN:cn=Shana Rains,email=mtn.shana@gmail.com,O=madison telephone, llc,l=Madison KS 66860, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Shana Rains](#)Title or position of authorized officer or employee: [Regulatory Officer](#)Telephone number of authorized officer or employee: [620-437-2356](#)Study Area Code of  
Reporting Carrier:[411801](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MUTUAL TELEPHONE COMPANY](#)Signature of authorized officer or employee: [John Tietjens](#)Digitally signed by John Tietjens DN:cn=John  
Tietjens,email=jtietjens@mtc4me.com,O=mual telephone  
company,l=Little River KS 67457, Date:3/22/2021Date: [3/22/2021](#).Printed name of authorized officer or employee: [John Tietjens](#)Title or position of authorized officer or employee: [President & General Manager](#)Telephone number of authorized officer or employee: [620-897-6200](#)Study Area Code of  
Reporting Carrier:[411809](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">PEOPLES TELECOMMUNICATIONS, LLC</a>					
Signature of authorized officer or employee: <a href="#">Daniel Welch</a>				Digitally signed by Daniel Welch DN:cn=Daniel Welch,email=dwelch@peoplestelecom.net,O=peoples telecommunications, llc,l=Lacygne KS 66040-0186, Date:3/15/2021	
Date: <a href="#">3/15/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Daniel Welch</a>					
Title or position of authorized officer or employee: <a href="#">CEO/General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">913-757-2500</a>					
Study Area Code of Reporting Carrier:	<a href="#">411814</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [PIONEER TELEPHONE ASSOCIATION INC.](#)

Signature of authorized officer or employee: [Catherine Moyer](#)

Digitally signed by Catherine Moyer DN:cn=Catherine Moyer, email=catherine.moyer@pioncomm.net, O=pioneer telephone association inc., I=Ulysses KS 67880, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Catherine Moyer](#)

Title or position of authorized officer or employee: [CEO/General Manager](#)

Telephone number of authorized officer or employee: [620-356-7133](#)

Study Area Code of  
Reporting Carrier:

[411817](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">CRAW-KAN TELEPHONE COOP INC- KS</a>					
Signature of authorized officer or employee: <a href="#">Craig Wilbert</a>				Digitally signed by Craig Wilbert DN:cn=Craig Wilbert,email=crwilbert@ckt.net,O=craw-kan telephone coop inc-ks,lc=Girard KS 66743-0100, Date:3/18/2021	
Date: <a href="#">3/18/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Craig Wilbert</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">620-724-8235</a>					
Study Area Code of Reporting Carrier:	<a href="#">411818</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [RAINBOW TELECOMMUNICATIONS ASSOC., INC.](#)Signature of authorized officer or employee: [Kathy Ruoff](#)Digitally signed by Kathy Ruoff DN:cn=Kathy  
Ruoff,email=kathy@rainbowtel.com,O=rainbow telecommunications  
assoc., inc.,l=Everest KS 66424, Date:3/22/2021Date: [3/22/2021](#).Printed name of authorized officer or employee: [Kathy Ruoff](#)Title or position of authorized officer or employee: [Controller/CFO](#)Telephone number of authorized officer or employee: [785-548-7511](#)Study Area Code of  
Reporting Carrier:[411820](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [S & T TEL. COOP. ASSN.](#)

Signature of authorized officer or employee: [Christina Hickert](#)

Digitally signed by Christina Hickert DN:cn=Christina Hickert,email=christina.hickert@sttelcom.com,O=s & t tel. coop. assn.,l=Brewster KS 67732, Date:3/26/2021

Date: [3/26/2021](#).

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: [256-694-2256](#)

Study Area Code of  
Reporting Carrier:

[411827](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SOUTH CENTRAL TEL. ASSN. INC.-KS](#)

Signature of authorized officer or employee: [Carla Shearer](#)

Digitally signed by Carla Shearer DN:cn=Carla Shearer,email=cshearer@sctelcom.com,O=south central tel. assn. inc.-ks,l=Medicine Lodge KS 67104, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Carla Shearer](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [620-930-1082](#)

Study Area Code of  
Reporting Carrier:

[411831](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SOUTHERN KANSAS TEL. CO.,INC.](#)

Signature of authorized officer or employee: [William R. McVey](#)

Digitally signed by William R. McVey DN:cn=William R. McVey,email=will@sktc.net,O=southern kansas tel. co.,inc.,l=Clearwater KS 67026-0800, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [William R. McVey](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [620-584-8337](#)

Study Area Code of  
Reporting Carrier:

[411833](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [TRI-COUNTY TEL. ASSN. INC.-KS](#)

Signature of authorized officer or employee: [Dale L. Jones](#)

Digitally signed by Dale L. Jones DN:cn=Dale L. Jones,email=djones@tctainc.net,O=tri-county tel. assn. inc.-ks,l=Council Grove KS 66846-0299, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Dale L. Jones](#)

Title or position of authorized officer or employee: [CEO](#)

Telephone number of authorized officer or employee: [620-767-5153](#)

Study Area Code of  
Reporting Carrier:

[411839](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [UNITED TELEPHONE ASSOCIATION, INC.](#)

Signature of authorized officer or employee: [Jennifer Pachner](#)

Digitally signed by Jennifer Pachner DN:cn=Jennifer Pachner,email=jenniferp@unitedtelcom.net,O=united telephone association, inc.,l=Dodge City KS 67801, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Jennifer Pachner](#)

Title or position of authorized officer or employee: [Controller](#)

Telephone number of authorized officer or employee: [620-227-8641](#)

Study Area Code of  
Reporting Carrier:

[411841](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [WHEAT STATE TELEPHONE, INC.](#)

Signature of authorized officer or employee: [Randy Hoffman](#)

Digitally signed by Randy Hoffman DN:cn=Randy Hoffman,email=rhoffman@wheatstate.com,O=wheat state telephone, inc.,l=Udall KS 67146, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Randy Hoffman](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [620-782-3341](#)

Study Area Code of  
Reporting Carrier:

[411847](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [WILSON TELEPHONE COMPANY INC.](#)

Signature of authorized officer or employee: [Craig Freeman](#)

Digitally signed by Craig Freeman DN:cn=Craig  
Freeman,email=craig.freeman@wilsoncom.net,O=wilson telephone  
company inc.,l=Wilson KS 67490-0190, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Craig Freeman](#)

Title or position of authorized officer or employee: [Vice President / General Manager](#)

Telephone number of authorized officer or employee: [785-658-2111](#)

Study Area Code of  
Reporting Carrier:

[411849](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BPS Telephone Company](#)

Signature of authorized officer or employee: [Lisa Winberry](#)

Digitally signed by Lisa Winberry DN:cn=Lisa Winberry,email=Winberry@BPSTelephone.com,O=bps telephone company,l=Bernie MO 63822-0550, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Lisa Winberry](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [573-293-2277](#)

Study Area Code of  
Reporting Carrier:

[420463](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">IAMO COMMUNICATIONS, INC.-MO</a>					
Signature of authorized officer or employee: <a href="#">Jillinda Thornton</a>				Digitally signed by Jillinda Thornton DN:cn=Jillinda Thornton,email=jthornton@iamo.tel,O=iamo communications, inc.-mo,lc=Coin IA 51636-0368, Date:3/17/2021	
Date: <a href="#">3/17/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Jillinda Thornton</a>					
Title or position of authorized officer or employee: <a href="#">Office Manager</a>					
Telephone number of authorized officer or employee: <a href="#">712-583-3232</a>					
Study Area Code of Reporting Carrier:	<a href="#">421206</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [ALMA COMMUNICATIONS COMPANY DBA ALMA TEL. CO.](#)

Signature of authorized officer or employee: [Adolf L. Heins](#)

Digitally signed by Adolf L. Heins DN:cn=Adolf L.  
Heins,email=aheins@almanet.net,O=alma communications company  
dba alma tel. co.,l=Alma MO 64001, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Adolf L. Heins](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [660-674-2297](#)

Study Area Code of  
Reporting Carrier:

[421860](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [Ozark Telephone Company](#)

Signature of authorized officer or employee: [Wendy Ottman](#)

Digitally signed by Wendy Ottman DN:cn=Wendy Ottman,email=wendy@missouricom.co,O=ozark telephone company,l=Oregon MO 64473, Date:3/21/2021

Date: [3/21/2021](#).

Printed name of authorized officer or employee: [Wendy Ottman](#)

Title or position of authorized officer or employee: [Vice President of Finance](#)

Telephone number of authorized officer or employee: [573-835-4051](#)

Study Area Code of  
Reporting Carrier:

[421866](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [FARBER TELEPHONE COMPANY](#)Signature of authorized officer or employee: [Wendy Ottman](#)

Digitally signed by Wendy Ottman DN:cn=Wendy Ottman,email=wendy@missouricom.co,O=farber telephone company,l=Oregon MO 64473, Date:3/21/2021

Date: [3/21/2021](#).Printed name of authorized officer or employee: [Wendy Ottman](#)Title or position of authorized officer or employee: [Vice President of Finance](#)Telephone number of authorized officer or employee: [573-835-4051](#)Study Area Code of  
Reporting Carrier:[421876](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 **Farber Tel CO**

Signature of authorized officer or employee  Date **07/06/2021**

Printed name of authorized officer or employee **Wendy Ottman**

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

Telephone number of authorized officer or employee: ( **573** ) **835** - **4051** , ext.

Study Area Code of Reporting Carrier	<b>421876</b>		Filing Due Date for this form (mm/dd/yyyy)	July 2021	
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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**

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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">GOODMAN TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Wendy Ottman</a>				Digitally signed by Wendy Ottman DN:cn=Wendy Ottman,email=wendy@missouricom.co,O=goodman tel. co.,l=Oregon MO 64473, Date:3/21/2021	
Date: <a href="#">3/21/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Wendy Ottman</a>					
Title or position of authorized officer or employee: <a href="#">Vice President of Finance</a>					
Telephone number of authorized officer or employee: <a href="#">573-835-4051</a>					
Study Area Code of Reporting Carrier:	<a href="#">421886</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">GRANBY TEL CO - MISSOURI</a>					
Signature of authorized officer or employee: <a href="#">Cheri M. Johnson</a>				Digitally signed by Cheri M. Johnson DN:cn=Cheri M. Johnson,email=cheri@jscomm.net,O=granby tel co - missouri,l=Granby MO 64844, Date:3/22/2021	
Date: <a href="#">3/22/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Cheri M. Johnson</a>					
Title or position of authorized officer or employee: <a href="#">Corporate Secretary</a>					
Telephone number of authorized officer or employee: <a href="#">417-472-5513</a>					
Study Area Code of Reporting Carrier:	<a href="#">421887</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [KINGDOM TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Marla McCowan](#)

Digitally signed by Marla McCowan DN:cn=Marla McCowan,email=mmccowan@kingdomtelco.com,O=kingdom telephone company,L=Auxvasse MO 65231, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Marla McCowan](#)

Title or position of authorized officer or employee: [Assistant Board Secretary](#)

Telephone number of authorized officer or employee: [573-386-2241](#)

Study Area Code of  
Reporting Carrier:

[421901](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MCDONALD COUNTY TELEPHONE CO.](#)Signature of authorized officer or employee: [Ross M. Babbitt](#)

Digitally signed by Ross M. Babbitt DN:cn=Ross M. Babbitt,email=rbabbitt@olemac.net,O=mcdonald county telephone co.,l=Pineville MO 64856-0207, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Ross M. Babbitt](#)Title or position of authorized officer or employee: [President](#)Telephone number of authorized officer or employee: [417-223-4313](#)Study Area Code of  
Reporting Carrier:[421912](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 **McDonald County Telephone Co.**

Signature of authorized officer or employee  Date **07/06/2021**

Printed name of authorized officer or employee **Ross Babbitt**

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

Telephone number of authorized officer or employee: ( 417 ) 223 - 4313 , ext.

Study Area Code of Reporting Carrier **421912**

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

July 2021

**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**

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MILLER TELEPHONE COMPANY - MO](#)

Signature of authorized officer or employee: [John Ludenia](#)

Digitally signed by John Ludenia DN:cn=John  
Ludenia,email=jludenia@westsidetel.com,O=miller telephone  
company - mo,l=Morgantown WV 26501, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [John Ludenia](#)

Title or position of authorized officer or employee: [Vice President](#)

Telephone number of authorized officer or employee: [304-983-8642](#)

Study Area Code of  
Reporting Carrier:

[421920](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">NORTHEAST MISSOURI RURAL TEL. CO.</a>					
Signature of authorized officer or employee: <a href="#">Sarah Rouse</a>				Digitally signed by Sarah Rouse DN:cn=Sarah Rouse,email=sarahr@nemr.net,O=northeast missouri rural tel. co.,l=Green City MO 635450098, Date:3/23/2021	
Date: <a href="#">3/23/2021.</a>					
Printed name of authorized officer or employee: <a href="#">Sarah Rouse</a>					
Title or position of authorized officer or employee: <a href="#">CABS Coordinator</a>					
Telephone number of authorized officer or employee: <a href="#">660-874-4111</a>					
Study Area Code of Reporting Carrier:	<a href="#">421931</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [SENECA TEL. CO.](#)Signature of authorized officer or employee: [Wendy Ottman](#)

Digitally signed by Wendy Ottman DN:cn=Wendy Ottman,email=wendy@missouricom.co,O=seneca tel. co.,l=Oregon MO 64473, Date:3/21/2021

Date: [3/21/2021](#).Printed name of authorized officer or employee: [Wendy Ottman](#)Title or position of authorized officer or employee: [Vice President of Finance](#)Telephone number of authorized officer or employee: [573-835-4051](#)Study Area Code of  
Reporting Carrier:[421945](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

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

**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>Lavaca - Oklahoma</u>			
Signature of authorized officer or employee <u>T-t Lw</u>			Date <u>3-24-21</u>
Printed name of authorized officer or employee <u>Trent LeForce</u>			
Title or position of authorized officer or employee <u>CFO</u>			
Telephone number of authorized officer or employee: ( <u>405</u> ) <u>242</u> - <u>0336</u> , ext.			
Study Area Code of Reporting Carrier <u>431704</u>	Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2021</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

Certification-Agent

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

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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">KANOKLA TELEPHONE ASSOCIATION - OK</a>					
Signature of authorized officer or employee: <a href="#">Jill Kuehny</a>				Digitally signed by Jill Kuehny DN:cn=Jill Kuehny,email=jkuehny@kanokla.com,O=kanokla telephone association - ok,l=Caldwell KS 67022-0111, Date:3/22/2021	
Date: <a href="#">3/22/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Jill Kuehny</a>					
Title or position of authorized officer or employee: <a href="#">Chief Executive Officer</a>					
Telephone number of authorized officer or employee: <a href="#">620-845-5682</a>					
Study Area Code of Reporting Carrier:	<a href="#">431788</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SOUTH CENTRAL TEL. ASSN., INC.-OK](#)

Signature of authorized officer or employee: [Carla Shearer](#)

Digitally signed by Carla Shearer DN:cn=Carla Shearer,email=cshearer@sctelcom.com,O=south central tel. assn.,inc.-ok,l=Medicine Lodge KS 67104, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Carla Shearer](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [620-930-1082](#)

Study Area Code of  
Reporting Carrier:

[431831](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BEGGS TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Kay H. Mount](#)

Digitally signed by Kay H. Mount DN:cn=Kay H. Mount,email=staff@beggstelco.net,O=beggs telephone company,l=Beggs OK 74421-0749, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Kay H. Mount](#)

Title or position of authorized officer or employee: [Pres. & General Manager](#)

Telephone number of authorized officer or employee: [918-267-3636](#)

Study Area Code of  
Reporting Carrier:

[431968](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BIXBY TELEPHONE CO.](#)

Signature of authorized officer or employee: [Scott Lowry](#)

Digitally signed by Scott Lowry DN:cn=Scott Lowry,email=slowry@mybtc.com,O=bixby telephone co.,l=Bixby OK 74008, Date:3/25/2021

Date: [3/25/2021](#).

Printed name of authorized officer or employee: [Scott Lowry](#)

Title or position of authorized officer or employee: [President & CEO](#)

Telephone number of authorized officer or employee: [918-366-0250](#)

Study Area Code of  
Reporting Carrier:

[431969](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CANADIAN VALLEY TELEPHONE CO.](#)

Signature of authorized officer or employee: [Misty Souther](#)

Digitally signed by Misty Souther DN:cn=Misty Souther,email=msouther@cvok.net,O=canadian valley telephone co.,l=Crowder OK 74430, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Misty Souther](#)

Title or position of authorized officer or employee: [Office Manager](#)

Telephone number of authorized officer or employee: [918-334-3700](#)

Study Area Code of  
Reporting Carrier:

[431974](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CENTRAL OKLAHOMA TELEPHONE CO., L.L.C.](#)

Signature of authorized officer or employee: [Steve Guest](#)

Digitally signed by Steve Guest DN:cn=Steve Guest,email=steveg@cotc.net,O=central oklahoma telephone co.,l.l.c.,l=Davenport OK 74026-0789, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Steve Guest](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [918-377-2241](#)

Study Area Code of  
Reporting Carrier:

[431977](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [CHICKASAW TELEPHONE CO.](#)Signature of authorized officer or employee: [Larry D. Jones](#)Digitally signed by Larry D. Jones DN:cn=Larry D.  
Jones,email=larry@chickasawphone.net,O=chickasaw telephone  
co.,l=Sulphur OK 73086-0460, Date:3/17/2021Date: [3/17/2021](#).Printed name of authorized officer or employee: [Larry D. Jones](#)Title or position of authorized officer or employee: [Vice President](#)Telephone number of authorized officer or employee: [580-622-5223](#)Study Area Code of  
Reporting Carrier:[431980](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

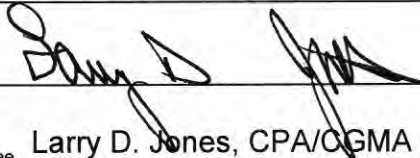
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**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 **Chickasaw Telephone Company**

Signature of authorized officer or employee



Date

**07/06/2021**

Printed name of authorized officer or employee

**Larry D. Jones, CPA/CGMA**

Title or position of authorized officer or employee

**Vice President/Chief Financial Officer**

Telephone number of authorized officer or employee: ( 580 ) 622 - 5223 , ext.

Study Area Code of Reporting Carrier

**431980**

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

July 2021

**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**

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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">GRAND TELEPHONE CO. INC.</a>					
Signature of authorized officer or employee: <a href="#">Jason Anderson</a>				<small>Digitally signed by Jason Anderson DN:cn=Jason Anderson,email=jsanderson@grand.net,O=grand telephone co. inc.,l=Jay OK 74346-0308, Date:3/18/2021</small>	
Date: <a href="#">3/18/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Jason Anderson</a>					
Title or position of authorized officer or employee: <a href="#">Controller/Co-Manager/1st Vice President</a>					
Telephone number of authorized officer or employee: <a href="#">918-253-4231</a>					
Study Area Code of Reporting Carrier:	<a href="#">431994</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MEDICINE PARK TELEPHONE CO.](#)Signature of authorized officer or employee: [Dean Pennello](#)

Digitally signed by Dean Pennello DN:cn=Dean Pennello,email=dean.pennello@hillcom.net,O=medicine park telephone co.,l=Lawton OK 73557, Date:3/18/2021

Date: [3/18/2021](#).Printed name of authorized officer or employee: [Dean Pennello](#)Title or position of authorized officer or employee: [CFO](#)Telephone number of authorized officer or employee: [580-529-2700](#)Study Area Code of  
Reporting Carrier:[432008](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [PANHANDLE TELEPHONE COOPERATIVE INC.](#)

Signature of authorized officer or employee: [Kelley Wells](#)

Digitally signed by Kelley Wells DN:cn=Kelley Wells,email=kelly.wells@ptci.net,O=panhandle telephone cooperative inc.,l=Guymon OK 73942, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Kelley Wells](#)

Title or position of authorized officer or employee: [Regulatory Affairs Manager](#)

Telephone number of authorized officer or employee: [580-468-2179](#)

Study Area Code of  
Reporting Carrier:

[432016](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">PINE TELEPHONE CO INC- OK</a>					
Signature of authorized officer or employee: <a href="#">Jane Merz</a>				<small>Digitally signed by Jane Merz DN:cn=Jane Merz,email=jane@pinetelephone.com,O=pine telephone co inc-ok,lc=Broken Bow OK 74728, Date:3/18/2021</small>	
Date: <a href="#">3/18/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Jane Merz</a>					
Title or position of authorized officer or employee: <a href="#">Accounting Supervisor</a>					
Telephone number of authorized officer or employee: <a href="#">580-584-3100</a>					
Study Area Code of Reporting Carrier:	<a href="#">432017</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [KANOKLA SHIDLER, LLC](#)

Signature of authorized officer or employee: [Jill Kuehny](#)

Digitally signed by Jill Kuehny DN:cn=Jill Kuehny,email=jkuehny@kanokla.com,O=kanokla shidler, llc,l=Caldwell KS 67022-0111, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Jill Kuehny](#)

Title or position of authorized officer or employee: [Chief Executive Officer](#)

Telephone number of authorized officer or employee: [620-845-5682](#)

Study Area Code of  
Reporting Carrier:

[432023](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [TERRAL TEL. CO.](#)

Signature of authorized officer or employee: [Chad Segress](#)

Digitally signed by Chad Segress DN:cn=Chad Segress,email=chad@wavelinx.com,O=terral tel. co.,l=Oklahoma City OK 73134, Date:3/26/2021

Date: [3/26/2021](#).

Printed name of authorized officer or employee: [Chad Segress](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [405-609-7164](#)

Study Area Code of  
Reporting Carrier:

[432029](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [TOTAH COMMUNICATIONS, INC.](#)

Signature of authorized officer or employee: [Keith E. Watson](#)

Digitally signed by Keith E. Watson DN:cn=Keith E. Watson,email=kewatson@totelcsi.com,O=totah communications, inc.,l=Ochelata OK 74051-0300, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Keith E. Watson](#)

Title or position of authorized officer or employee: [Executive VP / Controller](#)

Telephone number of authorized officer or employee: [918-535-2208](#)

Study Area Code of  
Reporting Carrier:

[432030](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WYANDOTTE TELEPHONE COMPANY](#)Signature of authorized officer or employee: [Wendy Ottman](#)

Digitally signed by Wendy Ottman DN:cn=Wendy Ottman,email=wendy@missouricom.co,O=wyandotte telephone company,l=Oregon MO 64473, Date:3/21/2021

Date: [3/21/2021](#).Printed name of authorized officer or employee: [Wendy Ottman](#)Title or position of authorized officer or employee: [Vice President of Finance](#)Telephone number of authorized officer or employee: [573-835-4051](#)Study Area Code of  
Reporting Carrier:[432034](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BLOSSOM TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Kelly Dorries](#)

Digitally signed by Kelly Dorries DN:cn=Kelly Dorries,email=kelly@blossomtel.net,O=blossom telephone company,l=Blossom TX 75416, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Kelly Dorries](#)

Title or position of authorized officer or employee: [Vice President](#)

Telephone number of authorized officer or employee: [903-982-5200](#)

Study Area Code of  
Reporting Carrier:

[442038](#)

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

[03/31/2021](#)

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

**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>Big Bend Telephone Co., Inc.</u>			
Signature of authorized officer or employee 			Date <u>03/23/2021</u>
Printed name of authorized officer or employee <u>Russell A. Moore</u>			
Title or position of authorized officer or employee <u>GM / COO</u>			
Telephone number of authorized officer or employee: ( <u>432</u> ) <u>364</u> - <u>1000</u> , ext. <u>0089</u>			
Study Area Code of Reporting Carrier	<u>442039</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2021</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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

Big Bend Telephone Co., INC.

Signature of authorized officer or employee

*Russell A. Moore*

Date

7/7/2021

Printed name of authorized officer or employee

Russell A. Moore

Title or position of authorized officer or employee

GM / COO

Telephone number of authorized officer or employee: (432) 364 - 0089 ext.

Study Area Code of Reporting Carrier

442039

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

July 2021

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**

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BRAZORIA TEL. CO.](#)

Signature of authorized officer or employee: [Mark Garner](#)

Digitally signed by Mark Garner DN:cn=Mark  
Garner,email=mark@btel.com,O=brazoria tel. co.,l=Brazoria TX  
77422, Date:3/24/2021

Date: [3/24/2021](#).

Printed name of authorized officer or employee: [Mark Garner](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [979-798-2121](#)

Study Area Code of  
Reporting Carrier:

[442040](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [COMMUNITY TELEPHONE COMPANY, INC.](#)

Signature of authorized officer or employee: [Jenny Barton](#)

Digitally signed by Jenny Barton DN:cn=Jenny Barton,email=jennybarton@comcell.net,O=community telephone company, inc.,l=Windthorst TX 76389, Date:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Jenny Barton](#)

Title or position of authorized officer or employee: [Bookkeeper](#)

Telephone number of authorized officer or employee: [940-423-6201](#)

Study Area Code of  
Reporting Carrier:

[442061](#)

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

[03/31/2021](#)

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

**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>Dell Telephone Coop TX</u>					
Signature of authorized officer or employee <u>[Signature]</u> <u>2-22-21</u>					
Printed name of authorized officer or employee <u>Joel Muniz</u>					
Title or position of authorized officer or employee <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>915 ) 964 2352</u> , ext. <u>144</u>					
Study Area Code of Reporting Carrier <u>915</u>	<u>442066</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2021</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**

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [EASTEX TELEPHONE COOPERATIVE INC.](#)

Signature of authorized officer or employee: [Steve Alexander](#)

Digitally signed by Steve Alexander DN:cn=Steve Alexander,email=stevena@eastex.com,O=eastex telephone cooperative inc.,l=Henderson TX 75653-0150, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Steve Alexander](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [903-854-1121](#)

Study Area Code of  
Reporting Carrier:

[442068](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">ELECTRA TELEPHONE COMPANY, INC.</a>					
Signature of authorized officer or employee: <a href="#">Dean Pennello</a>				Digitally signed by Dean Pennello DN:cn=Dean Pennello,email=dean.pennello@hillcom.net,O=electra telephone company, inc., e= , Date:3/18/2021	
Date: <a href="#">3/18/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Dean Pennello</a>					
Title or position of authorized officer or employee: <a href="#">CFO</a>					
Telephone number of authorized officer or employee: <a href="#">580-529-5000</a>					
Study Area Code of Reporting Carrier:	<a href="#">442069</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [BORDER TO BORDER COMMUNICATIONS](#)Signature of authorized officer or employee: [Dean Pennello](#)

Digitally signed by Dean Pennello DN:cn=Dean Pennello,email=dean.pennello@hillcom.net,O=border to border communications,|, Date:3/18/2021

Date: [3/18/2021](#).Printed name of authorized officer or employee: [Dean Pennello](#)Title or position of authorized officer or employee: [CFO](#)Telephone number of authorized officer or employee: [580-529-5000](#)Study Area Code of  
Reporting Carrier:[442073](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GANADO TELEPHONE COMPANY INC.](#)

Signature of authorized officer or employee: [Bill Rakowitz](#)

Digitally signed by Bill Rakowitz DN:cn=Bill Rakowitz,email=bill@ykc.com,O=ganado telephone company inc.,l=Ganado TX 77962, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Bill Rakowitz](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [361-771-3331](#)

Study Area Code of  
Reporting Carrier:

[442076](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GUADALUPE VALLEY TEL CO-OP. INC.](#)

Signature of authorized officer or employee: [Robert A. Hunt](#)

Digitally signed by Robert A. Hunt DN:cn=Robert A. Hunt,email=robert.hunt@gvtc.net,O=guadalupe valley tel co-op. inc.,l=New Braunfels TX 78132-5900, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Robert A. Hunt](#)

Title or position of authorized officer or employee: [VP-Regulatory Affairs & Bus Ops](#)

Telephone number of authorized officer or employee: [830-885-8239](#)

Study Area Code of  
Reporting Carrier:

[442083](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [ALENCO COMMUNICATIONS, INC.](#)Signature of authorized officer or employee: [Ray Bussell](#)Digitally signed by Ray Bussell DN:cn=Ray  
Bussell,email=ray@aciglobal.com,O=alenco communications,  
inc.,l=Joshua TX 76058, Date:3/22/2021Date: [3/22/2021](#).Printed name of authorized officer or employee: [Ray Bussell](#)Title or position of authorized officer or employee: [General Manager](#)Telephone number of authorized officer or employee: [817-447-0127](#)Study Area Code of  
Reporting Carrier:[442090](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [ETS TELEPHONE COMPANY, INC.](#)

Signature of authorized officer or employee: [Sam Luxton](#)

Digitally signed by Sam Luxton DN:cn=Sam Luxton,email=sluxton@entouchsystems.net,O=ets telephone company, inc.,l=Houston TX 77042, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Sam Luxton](#)

Title or position of authorized officer or employee: [President/CEO](#)

Telephone number of authorized officer or employee: [281-225-0501](#)

Study Area Code of  
Reporting Carrier:

[442091](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LA WARD TELEPHONE EXCHANGE INC.](#)

Signature of authorized officer or employee: [Terri Parker](#)

Digitally signed by Terri Parker DN:cn=Terri Parker,email=terri@laward.org,O=la ward telephone exchange inc.,l=La Ward TX 77970-0246, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Terri Parker](#)

Title or position of authorized officer or employee: [Secretary/Treasurer](#)

Telephone number of authorized officer or employee: [361-872-2211](#)

Study Area Code of  
Reporting Carrier:

[442103](#)

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

[03/31/2021](#)

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

**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>Lake Livingston Telephone Company</b>			
Signature of authorized officer or employee 			Date <b>03/22/2021</b>
Printed name of authorized officer or employee <b>William Whitten</b>			
Title or position of authorized officer or employee <b>General Manager</b>			
Telephone number of authorized officer or employee: ( 936 ) 566 - 4000 , ext.			
Study Area Code of Reporting Carrier	<b>442104</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2021</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. 1635

**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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">LIPAN TELEPHONE COMPANY</a>					
Signature of authorized officer or employee: <a href="#">Beth Howard</a>				Digitally signed by Beth Howard DN:cn=Beth Howard,email=bethh@lipan.net,O=lipan telephone company,l=Lipan TX 76462, Date:3/18/2021	
Date: <a href="#">3/18/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Beth Howard</a>					
Title or position of authorized officer or employee: <a href="#">Sec / Treasurer</a>					
Telephone number of authorized officer or employee: <a href="#">254-646-2211</a>					
Study Area Code of Reporting Carrier:	<a href="#">442105</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LIVINGSTON TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Deborah Rand](#)

Digitally signed by Deborah Rand DN:cn=Deborah Rand,email=drand@usch.com,O=livingston telephone company,l=Livingston TX 77351, Date:3/18/2021

Date: [3/18/2021](#).

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](#)

Study Area Code of  
Reporting Carrier:

[442107](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MUNSTER TEL. CORP. OF TX DBA NORTEX COMM.](#)Signature of authorized officer or employee: [Alan Rohmer](#)

Digitally signed by Alan Rohmer DN:cn=Alan Rohmer,email=arohmer@nortex.com,O=muenster tel. corp. of tx dba nortex comm.,l=Muenster TX 76252, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Alan Rohmer](#)Title or position of authorized officer or employee: [CFO](#)Telephone number of authorized officer or employee: [940-759-2251](#)Study Area Code of  
Reporting Carrier:[442116](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">PEOPLES TELEPHONE COOPERATIVE - TX</a>					
Signature of authorized officer or employee: <a href="#">Lloyd Steven Steele</a>				Digitally signed by Lloyd Steven Steele DN:cn=Lloyd Steven Steele,email=steven.steele@gopeoples.net,O=peoples telephone cooperative - tx,l=Quitman TX 75783-0228, Date:3/22/2021	
Date: <a href="#">3/22/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Lloyd Steven Steele</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">903-878-3132</a>					
Study Area Code of Reporting Carrier:	<a href="#">442130</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SOUTHWEST TEXAS TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Gary Gilmer](#)

Digitally signed by Gary Gilmer DN:cn=Gary  
Gilmer,email=gary@swtexas.com,O=southwest texas telephone  
company,l=Rocksprings TX 78880, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Gary Gilmer](#)

Title or position of authorized officer or employee: [President, CEO](#)

Telephone number of authorized officer or employee: [830-683-2111](#)

Study Area Code of  
Reporting Carrier:

[442135](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [TATUM TEL. CO.](#)

Signature of authorized officer or employee: [Dean Pennello](#)

Digitally signed by Dean Pennello DN:cn=Dean Pennello,email=dean.pennello@hillcom.net,O=tatum tel. co.,l= ,  
Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Dean Pennello](#)

Title or position of authorized officer or employee: [CFO](#)

Telephone number of authorized officer or employee: [580-529-5000](#)

Study Area Code of  
Reporting Carrier:

[442150](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [VALLEY TELEPHONE CO-OP. INC. - TX](#)Signature of authorized officer or employee: [Dave Osborn](#)

Digitally signed by Dave Osborn DN:cn=Dave Osborn,email=dave.osborn@vtx1.net,O=valley telephone co-op. inc. - tx,l=Raymondville TX 78580, Date:3/17/2021

Date: [3/17/2021](#).Printed name of authorized officer or employee: [Dave Osborn](#)Title or position of authorized officer or employee: [CEO](#)Telephone number of authorized officer or employee: [956-642-1124](#)Study Area Code of  
Reporting Carrier:[442159](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">SAN CARLOS APACHE TELECOMM. UTILITY, INC.</a>					
Signature of authorized officer or employee: <a href="#">Shirley Ortiz</a>				<small>Digitally signed by Shirley Ortiz DN:cn=Shirley Ortiz,email=shirley.ortiz@scatui.com,O=san carlos apache telecomm. utility, inc.,I=Peridot AZ 85542, Date:3/24/2021</small>	
Date: <a href="#">3/24/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Shirley Ortiz</a>					
Title or position of authorized officer or employee: <a href="#">CEO/General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">928-475-7058</a>					
Study Area Code of Reporting Carrier:	<a href="#">452169</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GILA RIVER TELECOMMUNICATIONS, INC.](#)

Signature of authorized officer or employee: [James Meyers](#)

Digitally signed by James Meyers DN:cn=James Meyers,email=jmeyers@gilarivertel.com,O=gila river telecommunications, inc.,l=Chandler AZ 85226, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [James Meyers](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [520-796-8885](#)

Study Area Code of  
Reporting Carrier:

[452179](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [FORT MOJAVE TELECOMMUNICATIONS, INC.](#)Signature of authorized officer or employee: [Michael Scully](#)

Digitally signed by Michael Scully DN:cn=Michael Scully,email=mscully@ftmojave.net,O=fort mojave telecommunications, inc.,l=Mohave Valley AZ 86440, Date:3/24/2021

Date: [3/24/2021](#).Printed name of authorized officer or employee: [Michael Scully](#)Title or position of authorized officer or employee: [General Manager](#)Telephone number of authorized officer or employee: [928-346-2523](#)Study Area Code of  
Reporting Carrier:[452200](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MIDVALE TELEPHONE EXCHANGE, INC.-ARIZONA](#)

Signature of authorized officer or employee: [John Stuart](#)

Digitally signed by John Stuart DN:cn=John Stuart,email=john.stuart@mtecom.com,O=midvale telephone exchange, inc.-arizona,l=Midvale ID 83645, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [John Stuart](#)

Title or position of authorized officer or employee: [CEO](#)

Telephone number of authorized officer or employee: [208-355-2211](#)

Study Area Code of  
Reporting Carrier:

[452226](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [BLANCA TELEPHONE COMPANY DBA BLANCA NETWORKS](#)Signature of authorized officer or employee: [Alan Wehe](#)

Digitally signed by Alan Wehe DN:cn=Alan Wehe,email=alanwehe@gojade.org,O=blanca telephone company dba blanca networks,l=Alamosa CO 81101, Date:3/23/2021

Date: [3/23/2021](#).Printed name of authorized officer or employee: [Alan Wehe](#)Title or position of authorized officer or employee: [President](#)Telephone number of authorized officer or employee: [719-379-3839](#)Study Area Code of  
Reporting Carrier:[462182](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">NUNN TEL. COMPANY</a>					
Signature of authorized officer or employee: <a href="#">Greg Grablander</a>				Digitally signed by Greg Grablander DN:cn=Greg Grablander,email=greg@ezlink.com,O=nunn tel. company,l=Nunn CO 80648, Date:3/15/2021	
Date: <a href="#">3/15/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Greg Grablander</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">970-897-2200</a>					
Study Area Code of Reporting Carrier:	<a href="#">462194</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [ALBION TEL. CO. D/B/A ATC COMMUNICATIONS](#)

Signature of authorized officer or employee: [Rich Redman](#)

Digitally signed by Rich Redman DN:cn=Rich Redman,email=rredman@atccomm.com,O=albion tel. co. d/b/a atc communications,|=Albion ID 83311, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Rich Redman](#)

Title or position of authorized officer or employee: [Vice President](#)

Telephone number of authorized officer or employee: [208-673-5335](#)

Study Area Code of  
Reporting Carrier:

[472213](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CUSTER TEL. COOPERATIVE INC.](#)

Signature of authorized officer or employee: [James Bennetts](#)

Digitally signed by James Bennetts DN:cn=James Bennetts,email=jd.bennetts@custertel.com,O=custer tel. cooperative inc.,l=Challis ID 83226, Date:3/20/2021

Date: [3/20/2021](#).

Printed name of authorized officer or employee: [James Bennetts](#)

Title or position of authorized officer or employee: [CEO](#)

Telephone number of authorized officer or employee: [208-879-2281](#)

Study Area Code of  
Reporting Carrier:

[472218](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [FILER MUTUAL TEL. COMPANY-ID dba TRULEAP TECH](#)

Signature of authorized officer or employee: [Bob Kraut](#)

Digitally signed by Bob Kraut DN:cn=Bob Kraut,email=bkraut@truleap.net,O=filer mutual tel. company-id dba truleap tech,l=Filr ID 83328-0089, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Bob Kraut](#)

Title or position of authorized officer or employee: [General Manager/COO](#)

Telephone number of authorized officer or employee: [208-326-4330](#)

Study Area Code of  
Reporting Carrier:

[472220](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [FARMERS MUTUAL TEL CO LTD. - ID](#)

Signature of authorized officer or employee: [Daniel E. Greig](#)

Digitally signed by Daniel E. Greig DN:cn=Daniel E. Greig, email=dan@fmtc.com, O=farmers mutual tel co ltd. - id, l=Fruitland ID 83619, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Daniel E. Greig](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [208-452-3100](#)

Study Area Code of  
Reporting Carrier:

[472221](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MIDVALE TEL. EXCH. INC.](#)Signature of authorized officer or employee: [John Stuart](#)Digitally signed by John Stuart DN:cn=John  
Stuart,email=john.stuart@mtecom.com,O=midvale tel. exch.  
inc.,l=Midvale ID 83645, Date:3/18/2021Date: [3/18/2021](#).Printed name of authorized officer or employee: [John Stuart](#)Title or position of authorized officer or employee: [CEO](#)Telephone number of authorized officer or employee: [208-355-2211](#)Study Area Code of  
Reporting Carrier:[472226](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [DIRECT COMMUNICATIONS ROCKLAND, INC.](#)

Signature of authorized officer or employee: [Jeremy Smith](#)

Digitally signed by Jeremy Smith DN:cn=Jeremy  
Smith,email=jerry@directcom.com,O=direct communications  
rockland, inc.,l=Rockland ID 83271, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Jeremy Smith](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [208-548-2345](#)

Study Area Code of  
Reporting Carrier:

[472232](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [INTERBEL TEL. COOPERATIVE INC.](#)

Signature of authorized officer or employee: [Kevin Hodik](#)

Digitally signed by Kevin Hodik DN:cn=Kevin Hodik,email=khodik@interbel.com,O=interbel tel. cooperative inc.,l=Eureka MT 59917, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Kevin Hodik](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [406-889-3311](#)

Study Area Code of  
Reporting Carrier:

[482242](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [3-RIVERS TEL. COOPERATIVE INC.](#)Signature of authorized officer or employee: [David M. Massey](#)Digitally signed by David M. Massey DN:cn=David M.  
Massey,email=david.massey@3rivers.coop,O=3-rivers tel.  
cooperative inc.,l=Fairfield MT 59436, Date:3/25/2021Date: [3/25/2021](#).Printed name of authorized officer or employee: [David M. Massey](#)Title or position of authorized officer or employee: [CFO/Director of Finance](#)Telephone number of authorized officer or employee: [406-467-4402](#)Study Area Code of  
Reporting Carrier:[482255](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [TRIANGLE TEL. COOPERATIVE ASSN. INC.](#)Signature of authorized officer or employee: [Craig Gates](#)Digitally signed by Craig Gates DN:cn=Craig  
Gates,email=cgates@itstriangle.net,O=triangle tel. cooperative assn.  
inc.,l= , Date:3/23/2021Date: [3/23/2021](#).Printed name of authorized officer or employee: [Craig Gates](#)Title or position of authorized officer or employee: [CEO](#)Telephone number of authorized officer or employee: [406-394-7807](#)Study Area Code of  
Reporting Carrier:[482257](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [TRIANGLE TELEPHONE COOPERATIVE ASSN.,INC.-CMC](#)Signature of authorized officer or employee: [Craig Gates](#)Digitally signed by Craig Gates DN:cn=Craig  
Gates,email=cgates@itstriangle.net,O=triangle telephone cooperative  
assn.,inc.-cmc,l= , Date:3/23/2021Date: [3/23/2021](#).Printed name of authorized officer or employee: [Craig Gates](#)Title or position of authorized officer or employee: [CEO](#)Telephone number of authorized officer or employee: [406-394-7807](#)Study Area Code of  
Reporting Carrier:[483310](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

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

**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>3/22/21</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: ( <u>575</u> ) <u>464</u> - <u>4039</u> , ext.			
Study Area Code of Reporting Carrier	<u>491231</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2021</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>Dell Telephone Coop - NM</b>					
Signature of authorized officer or employee <i>Soel Muniz</i>					Date <b>2-22-21</b>
Printed name of authorized officer or employee <b>Soel Muniz</b>					
Title or position of authorized officer or employee <b>General Manager</b>					
Telephone number of authorized officer or employee: (      )      -      , ext.					
<b>505</b> Study Area Code of Reporting Carrier	<b>492066</b>		Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2021</b>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

Certification-Agent

TRANSMITTAL NO. 1635

**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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BACA VALLEY TEL. CO.](#)

Signature of authorized officer or employee: [Paul J. Briesh](#)

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:3/22/2021

Date: [3/22/2021](#).

Printed name of authorized officer or employee: [Paul J. Briesh](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [575-278-2101](#)

Study Area Code of  
Reporting Carrier:

[492259](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [E.N.M.R. TEL COOP. INC.-NM](#)

Signature of authorized officer or employee: [Alan Herman](#)

Digitally signed by Alan Herman DN:cn=Alan Herman,email=alanh@plateautel.com,O=e.n.m.r. tel coop. inc.-nm,l=Clovis NM 88101, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Alan Herman](#)

Title or position of authorized officer or employee: [Controller](#)

Telephone number of authorized officer or employee: [575-389-4212](#)

Study Area Code of  
Reporting Carrier:

[492262](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LA JICARITA RURAL TEL. COOP. INC.](#)

Signature of authorized officer or employee: [Danny Gray](#)

Digitally signed by Danny Gray DN:cn=Danny Gray,email=dgray@lajicarita.com,O=la jicarita rural tel. coop. inc.,l=Mora NM 87732-0269, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Danny Gray](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [575-387-2216](#)

Study Area Code of  
Reporting Carrier:

[492263](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LEACO RURAL TEL. COOPERATIVE INC.](#)

Signature of authorized officer or employee: [Steve Mueller](#)

Digitally signed by Steve Mueller DN:cn=Steve Mueller,email=smueller@leaco.org,O=leaco rural tel. cooperative inc.,l=Hobbs NM 88240, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Steve Mueller](#)

Title or position of authorized officer or employee: [Controller](#)

Telephone number of authorized officer or employee: [575-433-4728](#)

Study Area Code of  
Reporting Carrier:

[492264](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [Tularosa Basin Telephone Company, Inc.](#)

Signature of authorized officer or employee: [Joshua Beug](#)

Digitally signed by Joshua Beug DN:cn=Joshua Beug,email=jbeug@tbtc.net,O=tularosa basin telephone company, inc.,l=Tularosa NM 88352, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Joshua Beug](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [575-585-0125](#)

Study Area Code of  
Reporting Carrier:

[492265](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [PENASCO VALLEY TEL. COOPERATIVE INC.](#)

Signature of authorized officer or employee: [Kurt Garrard](#)

Digitally signed by Kurt Garrard DN:cn=Kurt Garrard,email=kgarrard@pvt.com,O=penasco valley tel. cooperative inc.,l=Artesia NM 88210, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Kurt Garrard](#)

Title or position of authorized officer or employee: [CFO](#)

Telephone number of authorized officer or employee: [575-748-1241](#)

Study Area Code of  
Reporting Carrier:

[492270](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SACRED WIND COMMUNICATIONS, INC.](#)

Signature of authorized officer or employee: [Terry Clark](#)

Digitally signed by Terry Clark DN:cn=Terry Clark,email=tclark@sacredwindnm.com,O=sacred wind communications, inc.,l=Albuquerque NM 87109, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Terry Clark](#)

Title or position of authorized officer or employee: [Controller](#)

Telephone number of authorized officer or employee: [505-908-2661](#)

Study Area Code of  
Reporting Carrier:

[493403](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [DIRECT COMMUNICATIONS CEDAR VALLEY, LLC](#)Signature of authorized officer or employee: [Kip A Wilson](#)

Digitally signed by Kip A Wilson DN:cn=Kip A Wilson,email=kip@directcom.com,O=direct communications cedar valley, llc,l=Rockland ID 83271, Date:3/15/2021

Date: [3/15/2021](#).Printed name of authorized officer or employee: [Kip A Wilson](#)Title or position of authorized officer or employee: [General Manager](#)Telephone number of authorized officer or employee: [208-548-2345](#)Study Area Code of  
Reporting Carrier:[500758](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [EMERY TELEPHONE dba EMERY TELCOM](#)

Signature of authorized officer or employee: [Jake Frandsen](#)

Digitally signed by Jake Frandsen DN:cn=Jake Frandsen,email=jfrandsen@emerytelcom.com,O=emery telephone dba emery telcom,l=Orangeville UT 84537, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Jake Frandsen](#)

Title or position of authorized officer or employee: [Accountant](#)

Telephone number of authorized officer or employee: [435-748-3151](#)

Study Area Code of  
Reporting Carrier:

[502278](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MANTI TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Tami Hansen](#)

Digitally signed by Tami Hansen DN:cn=Tami Hansen,email=tami@mail.manti.com,O=manti telephone company,/=Manti UT 84642, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Tami Hansen](#)

Title or position of authorized officer or employee: [Accounting Manager](#)

Telephone number of authorized officer or employee: [435-835-3391](#)

Study Area Code of  
Reporting Carrier:

[502282](#)

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

[03/31/2021](#)

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

**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>South Cental Utah Telephone Assn, Inc.</b>			
Signature of authorized officer or employee 			Date <b>03/24/2021</b>
Printed name of authorized officer or employee <b>Michael R East</b>			
Title or position of authorized officer or employee <b>President/CEO</b>			
Telephone number of authorized officer or employee: ( 435 ) 826 - 4211 , ext.			
Study Area Code of Reporting Carrier	<b>502286</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2021</b>
<small>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</small>			

## FCC Form 508

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

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [TRI-COUNTY TEL. ASSN. INC.-WY](#)Signature of authorized officer or employee: [Paula Riley](#)

Digitally signed by Paula Riley DN:cn=Paula Riley,email=paula.riley@tctstaff.com,O=tri-county tel. assn. inc.-wy,l=Basin WY 82410, Date:3/16/2021

Date: [3/16/2021](#).Printed name of authorized officer or employee: [Paula Riley](#)Title or position of authorized officer or employee: [Controller](#)Telephone number of authorized officer or employee: [307-568-2427](#)Study Area Code of  
Reporting Carrier:[512296](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SKYLINE TELECOM COMPANY](#)

Signature of authorized officer or employee: [Delinda Kluser](#)

Digitally signed by Delinda Kluser DN:cn=Delinda Kluser,email=deedeek@otcconnections.net,O=skyline telecom company,l=Mt. Vernon OR 97865-0609, Date:3/19/2021

Date: [3/19/2021](#).

Printed name of authorized officer or employee: [Delinda Kluser](#)

Title or position of authorized officer or employee: [Vice President, Manager](#)

Telephone number of authorized officer or employee: [541-932-4411](#)

Study Area Code of  
Reporting Carrier:

[520581](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [HAT ISLAND TELEPHONE COMPANY](#)Signature of authorized officer or employee: [Gary Ricketts](#)

Digitally signed by Gary Ricketts DN:cn=Gary Ricketts,email=Gary.ricketts@whidbeytel.com,O=hat island telephone company,l=Langley WA 98260, Date:3/24/2021

Date: [3/24/2021](#).Printed name of authorized officer or employee: [Gary Ricketts](#)Title or position of authorized officer or employee: [Secretary-Treasurer](#)Telephone number of authorized officer or employee: [360-321-0051](#)Study Area Code of  
Reporting Carrier:[522417](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [HOOD CANAL TELEPHONE COMPANY](#)Signature of authorized officer or employee: [Richard F. Buechel](#)

Digitally signed by Richard F. Buechel DN:cn=Richard F. Buechel, email=rbuechel@hcc.net, O=hood canal telephone company, l=Union WA 98592, Date:3/25/2021

Date: [3/25/2021](#).Printed name of authorized officer or employee: [Richard F. Buechel](#)Title or position of authorized officer or employee: [President](#)Telephone number of authorized officer or employee: [360-898-2481](#)Study Area Code of  
Reporting Carrier:[522419](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [KALAMA TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Rick Vitzthum](#)

Digitally signed by Rick Vitzthum DN:cn=Rick Vitzthum,email=rick@scattercreek.net,O=kalama telephone company,l=Tenino WA 98589, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Rick Vitzthum](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [360-264-3155](#)

Study Area Code of  
Reporting Carrier:

[522426](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MASHELL TELECOM INC.](#)

Signature of authorized officer or employee: [Danielle Clausen](#)

Digitally signed by Danielle Clausen DN:cn=Danielle Clausen,email=danielle.clausen@rainierconnect.net,O=mashell telecom inc.,l=Eatonville WA 98328, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Danielle Clausen](#)

Title or position of authorized officer or employee: [Controller](#)

Telephone number of authorized officer or employee: [360-832-4130](#)

Study Area Code of  
Reporting Carrier:

[522431](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">ST. JOHN TELEPHONE, INC.</a>					
Signature of authorized officer or employee: <a href="#">Eric Trump</a>				<small>Digitally signed by Eric Trump DN:cn=Eric Trump,email=eric@stjohncable.com,O=st. john telephone, inc.,l=St. John WA 99171, Date:3/23/2021</small>	
Date: <a href="#">3/23/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Eric Trump</a>					
Title or position of authorized officer or employee: <a href="#">General Manager</a>					
Telephone number of authorized officer or employee: <a href="#">509-648-3322</a>					
Study Area Code of Reporting Carrier:	<a href="#">522442</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [TENINO TEL. CO.](#)Signature of authorized officer or employee: [Rick Vitzthum](#)

Digitally signed by Rick Vitzthum DN:cn=Rick Vitzthum,email=rick@scattercreek.net,O=tenino tel. co.,l=Tenino WA 98589, Date:3/15/2021

Date: [3/15/2021](#).Printed name of authorized officer or employee: [Rick Vitzthum](#)Title or position of authorized officer or employee: [Chief Financial Officer](#)Telephone number of authorized officer or employee: [360-264-3155](#)Study Area Code of  
Reporting Carrier:[522446](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [TOLEDO TELEPHONE COMPANY INC.](#)

Signature of authorized officer or employee: [Philip G. Cappalonga](#)

Digitally signed by Philip G. Cappalonga DN:cn=Philip G. Cappalonga,email=phil@toledotel.net,O=toledo telephone company inc.,l=Toledo WA 98591, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [Philip G. Cappalonga](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [360-864-2004](#)

Study Area Code of  
Reporting Carrier:

[522447](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the 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>WESTERN WAHAKIUM COUNTY TELEPHONE CO.</u>			
Signature of authorized officer or employee		Date <u>3/22/2021</u>	
Printed name of authorized officer or employee		<u>STEVEN M. APPELO</u>	
Title or position of authorized officer or employee		<u>PRESIDENT</u>	
Telephone number of authorized officer or employee: ( <u>360</u> ) <u>465</u> - <u>2211</u> , ext.			
Study Area Code of Reporting Carrier	<u>522451</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2021</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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. 1635

## 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [WHIDBEY TEL. CO.](#)Signature of authorized officer or employee: [Gary Ricketts](#)

Digitally signed by Gary Ricketts DN:cn=Gary Ricketts,email=Gary.ricketts@whidbeytel.com,O=whidbey tel. co.,l=Langley WA 98260, Date:3/24/2021

Date: [3/24/2021](#).Printed name of authorized officer or employee: [Gary Ricketts](#)Title or position of authorized officer or employee: [Secretary-Treasurer](#)Telephone number of authorized officer or employee: [360-321-0051](#)Study Area Code of  
Reporting Carrier:[522452](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BEAVER CREEK COOPERATIVE TEL. CO.](#)

Signature of authorized officer or employee: [Paul Hauer](#)

Digitally signed by Paul Hauer DN:cn=Paul Hauer,email=phauer@cbsoregon.com,O=beaver creek cooperative tel. co.,l=Mt. Angel OR 97362, Date:3/16/2021

Date: [3/16/2021](#).

Printed name of authorized officer or employee: [Paul Hauer](#)

Title or position of authorized officer or employee: [CEO/President](#)

Telephone number of authorized officer or employee: [503-845-4433](#)

Study Area Code of  
Reporting Carrier:

[532359](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">CANBY TELEPHONE ASSOCIATION</a>					
Signature of authorized officer or employee: <a href="#">Paul Hauer</a>				Digitally signed by Paul Hauer DN:cn=Paul Hauer,email=phauer@cbsoregon.com,O=canby telephone association,I=Mt. Angel OR 97362, Date:3/16/2021	
Date: <a href="#">3/16/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Paul Hauer</a>					
Title or position of authorized officer or employee: <a href="#">CEO/President</a>					
Telephone number of authorized officer or employee: <a href="#">503-632-6314</a>					
Study Area Code of Reporting Carrier:	<a href="#">532362</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [CLEAR CREEK MUTUAL TELEPHONE CO.](#)Signature of authorized officer or employee: [Jason Henke](#)Digitally signed by Jason Henke DN:cn=Jason  
Henke,email=jhenke@clearcreek.coop,O=clear creek mutual  
telephone co.,I=Oregon City OR 97045, Date:3/16/2021Date: [3/16/2021](#).Printed name of authorized officer or employee: [Jason Henke](#)Title or position of authorized officer or employee: [President](#)Telephone number of authorized officer or employee: [503-631-2101](#)Study Area Code of  
Reporting Carrier:[532363](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [COLTON TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Stephanie Sauvageau](#)

Digitally signed by Stephanie Sauvageau DN:cn=Stephanie Sauvageau,email=stephanie@coltontel.com,O=colton telephone company,l=Colton OR 97017, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Stephanie Sauvageau](#)

Title or position of authorized officer or employee: [CFO](#)

Telephone number of authorized officer or employee: [503-824-5863](#)

Study Area Code of  
Reporting Carrier:

[532364](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [EAGLE TELEPHONE SYSTEM INC.](#)Signature of authorized officer or employee: [Mike Lattin](#)

Digitally signed by Mike Lattin DN:cn=Mike Lattin,email=eagle@eagletelephone.com,O=eagle telephone system inc.,l=Richland OR 97870, Date:3/18/2021

Date: [3/18/2021](#).Printed name of authorized officer or employee: [Mike Lattin](#)Title or position of authorized officer or employee: [Manager](#)Telephone number of authorized officer or employee: [541-893-6111](#)Study Area Code of  
Reporting Carrier:[532369](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [GERVAIS TELEPHONE COMPANY DBA DATAVISION](#)Signature of authorized officer or employee: [Renee Willer](#)

Digitally signed by Renee Willer DN:cn=Renee Willer,email=rwiller@datavision.coop,O=gervais telephone company dba datavision,l=Gervais OR 97026, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Renee Willer](#)Title or position of authorized officer or employee: [President/CEO](#)Telephone number of authorized officer or employee: [503-792-5500](#)Study Area Code of  
Reporting Carrier:[532373](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [MOLALLA TELEPHONE COMPANY](#)Signature of authorized officer or employee: [Terry Simms](#)Digitally signed by Terry Simms DN:cn=Terry  
Simms,email=TSimms@molalla.com,O=molalla telephone  
company,l=Molalla OR 97038, Date:3/16/2021Date: [3/16/2021](#).Printed name of authorized officer or employee: [Terry Simms](#)Title or position of authorized officer or employee: [Vice President/CFO](#)Telephone number of authorized officer or employee: [503-829-1122](#)Study Area Code of  
Reporting Carrier:[532383](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [MONITOR COOPERATIVE TELEPHONE CO](#)

Signature of authorized officer or employee: [Stephanie N Sauvageau](#)

Digitally signed by Stephanie N Sauvageau DN:cn=Stephanie N Sauvageau,email=stephanie@coltontel.com,O=monitor cooperative telephone co,l=Woodburn OR 97071, Date:3/17/2021

Date: [3/17/2021](#).

Printed name of authorized officer or employee: [Stephanie N Sauvageau](#)

Title or position of authorized officer or employee: [CFO](#)

Telephone number of authorized officer or employee: [503-634-2266](#)

Study Area Code of  
Reporting Carrier:

[532384](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">CANBY TELEPHONE ASSOCIATION (MT. ANGEL)</a>					
Signature of authorized officer or employee: <a href="#">Paul Hauer</a>				<div>Digitally signed by Paul Hauer DN:cn=Paul Hauer, email=phauer@cbsoregon.com, O=canby telephone association (mt. angel), l=Mt. Angel OR 97362, Date:3/16/2021</div> <div>Date: <a href="#">3/16/2021</a>.</div>	
Printed name of authorized officer or employee: <a href="#">Paul Hauer</a>					
Title or position of authorized officer or employee: <a href="#">CEO/President</a>					
Telephone number of authorized officer or employee: <a href="#">503-632-6314</a>					
Study Area Code of Reporting Carrier:	<a href="#">532386</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [NEHALEM TELECOMMUNICATIONS, INC. DBA NEHALEM](#)Signature of authorized officer or employee: [Beverly Arrington](#)

Digitally signed by Beverly Arrington DN:cn=Beverly Arrington,email=beverly.arrington@ruraltel.org,O=nehalem telecommunications, inc. dba nehalem,=Glenns Ferry ID 83623, Date:3/22/2021

Date: [3/22/2021](#).Printed name of authorized officer or employee: [Beverly Arrington](#)Title or position of authorized officer or employee: [Senior Accounting Specialist](#)Telephone number of authorized officer or employee: [208-366-2614](#)Study Area Code of  
Reporting Carrier:[532387](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [OREGON-IDAHO UTILITIES, INC.](#)

Signature of authorized officer or employee: [Justin Perez](#)

Digitally signed by Justin Perez DN:cn=Justin Perez,email=justin.perez@oiutelecom.net,O=oregon-idaho utilities, inc.,l=Nampa ID 83651, Date:3/15/2021

Date: [3/15/2021](#).

Printed name of authorized officer or employee: [Justin Perez](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [208-461-7802](#)

Study Area Code of  
Reporting Carrier:

[532390](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">PEOPLES TELEPHONE CO. - OR</a>					
Signature of authorized officer or employee: <a href="#">Erik Hoefer</a>				Digitally signed by Erik Hoefer DN:cn=Erik Hoefer,email=ehoefer@sctcweb.com,O=peoples telephone co. - or,l=Stayton OR 97383, Date:3/17/2021	
Date: <a href="#">3/17/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Erik Hoefer</a>					
Title or position of authorized officer or employee: <a href="#">President/CEO</a>					
Telephone number of authorized officer or employee: <a href="#">503-769-4624</a>					
Study Area Code of Reporting Carrier:	<a href="#">532391</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [SCIO MUTUAL TEL. ASSOCIATION](#)Signature of authorized officer or employee: [Deborah Hogan](#)

Digitally signed by Deborah Hogan DN:cn=Deborah Hogan,email=debbie.hogan@smta.coop,O=scio mutual tel. association,l=Scio OR 97374, Date:3/19/2021

Date: [3/19/2021](#).Printed name of authorized officer or employee: [Deborah Hogan](#)Title or position of authorized officer or employee: [Controller](#)Telephone number of authorized officer or employee: [503-394-3369](#)Study Area Code of  
Reporting Carrier:[532397](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">STAYTON COOP. TEL CO</a>					
Signature of authorized officer or employee: <a href="#">Erik Hoefer</a>				<small>Digitally signed by Erik Hoefer DN:cn=Erik Hoefer,email=ehoefer@sctcweb.com,O=stayton coop. tel co,l=Stayton OR 97383, Date:3/17/2021</small>	
Date: <a href="#">3/17/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Erik Hoefer</a>					
Title or position of authorized officer or employee: <a href="#">President/CEO</a>					
Telephone number of authorized officer or employee: <a href="#">503-769-4624</a>					
Study Area Code of Reporting Carrier:	<a href="#">532399</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [CALAVERAS TELEPHONE COMPANY](#)Signature of authorized officer or employee: [Rose Cullen](#)Digitally signed by Rose Cullen DN:cn=Rose  
Cullen,email=rose.cullen@caltel.com,O=calaveras telephone  
company,lc= , Date:3/18/2021Date: [3/18/2021](#).Printed name of authorized officer or employee: [Rose Cullen](#)Title or position of authorized officer or employee: [Chief Financial Officer](#)Telephone number of authorized officer or employee: [209-785-2211](#)Study Area Code of  
Reporting Carrier:[542301](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [FORESTHILL TELEPHONE COMPANY DBA SEBASTIAN](#)

Signature of authorized officer or employee: [David D. Clark](#)

Digitally signed by David D. Clark DN:cn=David D.  
Clark,email=dclark@sebastiancorp.com,O=foresthill telephone  
company dba sebastian,l=Kerman CA 93630, Date:3/23/2021

Date: [3/23/2021](#).

Printed name of authorized officer or employee: [David D. Clark](#)

Title or position of authorized officer or employee: [Regulatory Manager](#)

Telephone number of authorized officer or employee: [559-846-4892](#)

Study Area Code of  
Reporting Carrier:

[542318](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [KERMAN TELEPHONE COMPANY DBA SEBASTIAN](#)Signature of authorized officer or employee: [David D. Clark](#)Digitally signed by David D. Clark DN:cn=David D.  
Clark,email=dclark@sebastiancorp.com,O=kerman telephone  
company dba sebastian,l=Kerman CA 93630, Date:3/23/2021Date: [3/23/2021](#).Printed name of authorized officer or employee: [David D. Clark](#)Title or position of authorized officer or employee: [Regulatory Manager](#)Telephone number of authorized officer or employee: [559-846-4892](#)Study Area Code of  
Reporting Carrier:[542324](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">THE PONDEROSA TELEPHONE COMPANY</a>					
Signature of authorized officer or employee: <a href="#">Rick Williams</a>				Digitally signed by Rick Williams DN:cn=Rick Williams,email=rickw@ponderosatel.com,O=the ponderosa telephone company,l=O'Neals CA 93645, Date:3/24/2021	
Date: <a href="#">3/24/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Rick Williams</a>					
Title or position of authorized officer or employee: <a href="#">CFO</a>					
Telephone number of authorized officer or employee: <a href="#">559-868-6392</a>					
Study Area Code of Reporting Carrier:	<a href="#">542332</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SIERRA TELEPHONE COMPANY, INC.](#)

Signature of authorized officer or employee: [Cynthia A. Huber](#)

Digitally signed by Cynthia A. Huber DN:cn=Cynthia A. Huber, email=cindyh@stcg.net, O=sierra telephone company, inc., l=Oakhurst CA 93644, Date:3/18/2021

Date: [3/18/2021](#).

Printed name of authorized officer or employee: [Cynthia A. Huber](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [559-642-0209](#)

Study Area Code of  
Reporting Carrier:

[542338](#)

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

[03/31/2021](#)

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

**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>Siskiyou Telephone Company</u>			
Signature of authorized officer or employee <u>James T. Lowers</u>			Date <u>03/15/2021</u>
Printed name of authorized officer or employee <u>James T. Lowers</u>			
Title or position of authorized officer or employee <u>President</u>			
Telephone number of authorized officer or employee: ( <u>530</u> ) <u>467</u> - <u>6000</u> , ext.			
Study Area Code of Reporting Carrier	<u>542339</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2021</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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. 1635

**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 <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent: <a href="#">The National Exchange Carrier Association, Inc. (NECA)</a>					
Name of Reporting Carrier: <a href="#">VOLCANO TELEPHONE COMPANY</a>					
Signature of authorized officer or employee: <a href="#">Brenda Shepard</a>				Digitally signed by Brenda Shepard DN:cn=Brenda Shepard,email=brendas@volcanotel.com,O=volcano telephone company,l=Pine Grove CA 95665, Date:3/19/2021	
Date: <a href="#">3/19/2021</a> .					
Printed name of authorized officer or employee: <a href="#">Brenda Shepard</a>					
Title or position of authorized officer or employee: <a href="#">Chief Financial Officer</a>					
Telephone number of authorized officer or employee: <a href="#">209-296-1447</a>					
Study Area Code of Reporting Carrier:	<a href="#">542343</a>		Filing Due Date for this form (mm/dd/yyyy)	<a href="#">03/31/2021</a>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [CHURCHILL COUNTY TEL. DBA CC COMMUNICATIONS](#)Signature of authorized officer or employee: [Mark Feest](#)

Digitally signed by Mark Feest DN:cn=Mark Feest,email=mark.feest@cccomm.co,O=churchill county tel. dba cc communications,l=Fallon NV 89407, Date:3/25/2021

Date: [3/25/2021](#).Printed name of authorized officer or employee: [Mark Feest](#)Title or position of authorized officer or employee: [General Manager](#)Telephone number of authorized officer or employee: [775-423-7654](#)Study Area Code of  
Reporting Carrier:[552349](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)Name of Reporting Carrier: [HUMBOLDT TELEPHONE COMPANY](#)Signature of authorized officer or employee: [Justin Perez](#)

Digitally signed by Justin Perez DN:cn=Justin Perez,email=justin.perez@oiutelecom.net,O=humboldt telephone company,I=Nampa ID 83651, Date:3/15/2021

Date: [3/15/2021](#).Printed name of authorized officer or employee: [Justin Perez](#)Title or position of authorized officer or employee: [Chief Financial Officer](#)Telephone number of authorized officer or employee: [208-461-7802](#)Study Area Code of  
Reporting Carrier:[553304](#)Filing Due Date for this  
form (mm/dd/yyyy)[03/31/2021](#)

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

**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>Sandwich Isles Communications, Inc.</b>			
Signature of authorized officer or employee 			Date <b>3-25-21</b>
Printed name of authorized officer or employee <b>Breanne Kahalewai</b>			
Title or position of authorized officer or employee <b>President</b>			
Telephone number of authorized officer or employee: ( 808 ) 524 - 8400 , ext.			
Study Area Code of Reporting Carrier	623021	Filing Due Date for this form (mm/dd/yyyy)	3/31/2021
<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**

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 [The 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: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [TELEGUAM HOLDINGS INC.](#)

Signature of authorized officer or employee: [Joe Shinohara](#)

Digitally signed by Joe Shinohara DN:cn=Joe Shinohara,email=jshinohara@gtc.net,O=teleguam holdings inc.,l=Tamuning GU 96913, Date:3/21/2021

Date: [3/21/2021](#).

Printed name of authorized officer or employee: [Joe Shinohara](#)

Title or position of authorized officer or employee: [VP of Finance & Controller](#)

Telephone number of authorized officer or employee: [671-644-1653](#)




Study Area Code of  
Reporting Carrier:

[663800](#)

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

[03/31/2021](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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>Teleguam Holdings, LLC</b></p>					
<p>Signature of authorized officer or employee </p>				<p>Date <b>07/07/2021</b></p>	
<p>Printed name of authorized officer or employee <b>Roland Certeza</b></p>					
<p>Title or position of authorized officer or employee <b>Chief Executive Officer</b></p>					
<p>Telephone number of authorized officer or employee: ( <b>671</b> ) <b>644</b> - <b>0005</b> , ext.</p>					
<p>Study Area Code of Reporting Carrier</p>	<p><b>663800</b></p>	<p></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p>July 2021</p>	<p></p>
<p>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p>					