

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., l=Lewiston ME 04240-7418, Date:3/22/2023

Date: [3/22/2023](#).

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: [207-890-9939](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 100002 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=cbryce@firstlight.net,O=oxford county tel. & tele. co.,l=Lewiston ME 04240-7418, Date:3/22/2023

Date: [3/22/2023](#).

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: [207-890-9939](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 100019 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | | |
|---|------------------------|--|--|--|-----------------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: UNITEL, INC. | | | | | |
| Signature of authorized officer or employee: Tim Roth | | | | Digitally signed by Tim Roth DN:cn=Tim Roth,email=troth@directcom.com,O=unitel, inc.,l=Rockland ID 83271, Date:3/28/2023 | Date: 3/28/2023 . |
| Printed name of authorized officer or employee: Tim Roth | | | | | |
| Title or position of authorized officer or employee: Analyst & Special Projects Manager | | | | | |
| Telephone number of authorized officer or employee: 208-945-8006 | | | | | |
| Study Area Code of Reporting Carrier: | 100029 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

| | | | | |
|--|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/24/2023 | |
| Date: 3/24/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/16/2023

Date: [3/16/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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

Name of Reporting Carrier: [FRANKLIN TEL. CO.-VT](#)

Signature of authorized officer or employee: [Kimberly Gates Maynard](#)

Digitally signed by Kimberly Gates Maynard DN:cn=Kimberly Gates Maynard,email=ftc@franklinvt.net,O=franklin tel. co.-vt,I=Franklin VT 05457, Date:3/22/2023

Date: [3/22/2023](#).

Printed name of authorized officer or employee: [Kimberly Gates Maynard](#)

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

Telephone number of authorized officer or employee: [802-285-9911](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 140053 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

Name of Authorized Agent National Exchange Carrier Association, Inc.

Name of Reporting Carrier TOPSHAM TELEPHONE COMPANY INC.

Signature of authorized officer or employee Mark De Perrin Date 03/02/2023

Printed name of authorized officer or employee MARK DE PERRIN

Title or position of authorized officer or employee CONTROLLER

Telephone number of authorized officer or employee: (315) 324 - 5911, ext.

| | | | |
|--------------------------------------|---------------|--|------------------|
| Study Area Code of Reporting Carrier | <u>140068</u> | Filing Due Date for this form (mm/dd/yyyy) | <u>3/31/2023</u> |
|--------------------------------------|---------------|--|------------------|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/23/2023

Date: [3/23/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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:3/21/2023

Date: [3/21/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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:3/14/2023

Date: [3/14/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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

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

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

Digitally signed by Wade Northrup DN:cn=Wade Northrup, email=wnorthrup@champlaintelephone.com,O=champlain tel. co.,l=Greenbelt MD 20770, Date:3/22/2023

Date: [3/22/2023](#).

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

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

Telephone number of authorized officer or employee: [518-324-9303](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 150077 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | | |
|--|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4). | | | | | |
| 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.knapp@cptelco.net,O=crown point tel. corp.,l=Crown Point NY 12928, Date:3/23/2023 | | |
| Date: 3/23/2023. | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

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

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:3/24/2023

Date: [3/24/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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: **Karen Borovich**

Digitally signed by Karen Borovich DN:cn=Karen Borovich,email=karen.borovich@gtelcorp.com,O=germantown tel. co.,inc.,l=Germantown NY 12526, Date:3/23/2023

Date: [3/23/2023](#).

Printed name of authorized officer or employee: [Karen Borovich](#)

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

Telephone number of authorized officer or employee: [518-537-1126](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 150097 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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: Shelby Buttenschon | | | Digitally signed by Shelby Buttenschon DN:cn=Shelby Buttenschon,email=sbuttenschon@northland.net,O=oneida county rural tel. co.,l=Holland Patent NY 13354, Date:3/21/2023 | | |
| Date: 3/21/2023 . | | | | | |
| Printed name of authorized officer or employee: Shelby Buttenschon | | | | | |
| Title or position of authorized officer or employee: Accountant | | | | | |
| Telephone number of authorized officer or employee: 315-865-3228 | | | | | |
| Study Area Code of Reporting Carrier: | 150111 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

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

Digitally signed by Marion Peisher DN:cn=Marion Peisher,email=accting@ottctel.com,O=ontario telephone company,inc.,l=Phelps NY 14532, Date:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Marion Peisher](#)

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

Telephone number of authorized officer or employee: [315-548-7561](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 150112 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | | |
|--|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/23/2023 | | |
| Date: 3/23/2023. | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

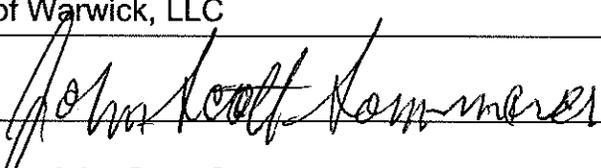
**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

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

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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: Marion Peisher | | | Digitally signed by Marion Peisher DN:cn=Marion Peisher, email=accting@ottctel.com, O=trumansburg telephone company, inc., l=Phelps NY 14532, Date:3/20/2023 | |
| Date: 3/20/2023 . | | | | |
| Printed name of authorized officer or employee: Marion Peisher | | | | |
| Title or position of authorized officer or employee: Controller | | | | |
| Telephone number of authorized officer or employee: 315-548-7561 | | | | |
| Study Area Code of Reporting Carrier: | 150131 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

| | | | | | |
|--|---------------|--|------------------|------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent National Exchange Carrier Association, Inc. | | | | | |
| Name of Reporting Carrier Alteva of Warwick, LLC | | | | | |
| Signature of authorized officer or employee  | | | | Date 03/21/2023 | |
| Printed name of authorized officer or employee John Scott Sommerer | | | | | |
| Title or position of authorized officer or employee Regulatory Tax Manager | | | | | |
| Telephone number of authorized officer or employee: (908) 221 - 1521 , ext. | | | | | |
| Study Area Code of Reporting Carrier | 160135 | Filing Due Date for this form (mm/dd/yyyy) | 3/31/2023 | | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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,l=Mount Pleasant PA 15666, Date:3/22/2023

Date: [3/22/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/15/2023 | |
| Date: 3/15/2023. | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

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

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

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

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

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

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

Signature of authorized officer or employee: [Patricia L Stewart](#)

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:3/17/2023

Date: [3/17/2023](#).

Printed name of authorized officer or employee: [Patricia L Stewart](#)

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

Telephone number of authorized officer or employee: [610-799-0225](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 170175 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=Donegal PA 15628, Date:3/22/2023

Date: [3/22/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: ARMSTRONG TEL. CO.-PA | | | | |
| Signature of authorized officer or employee: Barbara J Dizenzo | | | Digitally signed by Barbara J Dizenzo DN:cn=Barbara J Dizenzo,email=bdizenzo@agoc.com,O=armstrong tel. co.-pa,l=Butler PA 16001, Date:3/27/2023 Date: 3/27/2023 . | |
| Printed name of authorized officer or employee: Barbara J Dizenzo | | | | |
| Title or position of authorized officer or employee: Director - Finance and Accounting | | | | |
| Telephone number of authorized officer or employee: 724-283-0925 | | | | |
| Study Area Code of Reporting Carrier: | 170189 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

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

Digitally signed by Barbara J Direnzo DN:cn=Barbara J Direnzo,email=bdirenzo@agoc.com,O=armstrong tel. co. north,l=Butler PA 16001, Date:3/14/2023

Date: [3/14/2023](#).

Printed name of authorized officer or employee: [Barbara J Direnzo](#)

Title or position of authorized officer or employee: [Director - Finance and Accounting](#)

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/16/2023

Date: [3/16/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

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

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

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

Digitally signed by Richard Maietta DN:cn=Richard Maietta,email=rich.maietta@ptcbb.com,O=pennsylvania tel. co.,l=Jersey Shore PA 17740-9519, Date:3/21/2023

Date: [3/21/2023](#).

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

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

Telephone number of authorized officer or employee: [570-745-7101](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 170197 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | |
|--|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 CANAAN TEL. CO. | | | | |
| 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=south canaan tel. co.,l=Donegal PA 15628, Date:3/22/2023 | |
| Date: 3/22/2023 . | | | | |
| 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: | 170205 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

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

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

Name of Reporting Carrier: [YUKON-WALTZ TEL. CO.](#)

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=yukon-waltz tel. co.,l=Donegal PA 15628, Date:3/27/2023

Date: [3/27/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 170215 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

Digitally signed by Barbara J Dizenzo DN:cn=Barbara J Dizenzo,email=bdizenzo@agoc.com,O=armstrong tel. co. of md,l=Butler PA 16001, Date:3/14/2023

Date: [3/14/2023](#).

Printed name of authorized officer or employee: [Barbara J Dizenzo](#)

Title or position of authorized officer or employee: [Director - Finance and Accounting](#)

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

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 180216 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/22/2023

Date: [3/22/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 190219 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/14/2023

Date: [3/14/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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,l=Fort Defiance VA 24437, Date:3/15/2023

Date: [3/15/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

Digitally signed by Matt Harbaugh DN:cn=Matt Harbaugh,email=matthew.harbaugh@emp.shentel.com,O=shenandoah tel. co.,l=Edinburg VA 22824, Date:3/21/2023

Date: [3/21/2023](#).

Printed name of authorized officer or employee: [Matt Harbaugh](#)

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

Telephone number of authorized officer or employee: [814-233-4309](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 190250 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

Digitally signed by Matt Harbaugh DN:cn=Matt Harbaugh,email=matthew.harbaugh@emp.shentel.com,O=shenandoah telephone company - nr,l=Edinburg VA 22824, Date:3/21/2023

Date: [3/21/2023](#).

Printed name of authorized officer or employee: [Matt Harbaugh](#)

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

Telephone number of authorized officer or employee: [814-233-4309](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 197251 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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

Name of Reporting Carrier: [ITS TELECOMMUNICATIONS SYSTEMS, INC.](#)

Signature of authorized officer or employee: [Bruce Russell](#)

Digitally signed by Bruce Russell DN:cn=Bruce Russell,email=brussell@bluestreamfiber.com,O=its telecommunications systems, inc.,l=Indiantown FL 34956, Date:3/17/2023

Date: [3/17/2023](#).

Printed name of authorized officer or employee: [Bruce Russell](#)

Title or position of authorized officer or employee: [Director, Procurement & Purchasing](#)

Telephone number of authorized officer or employee: [772-597-2106](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 210331 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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

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

Signature of authorized officer or employee: [Andrea Mathie](#)

Digitally signed by Andrea Mathie DN:cn=Andrea Mathie,email=andrea.mathie@btctelcom.net,O=brantley tel. co.,inc.,l=Nahunta GA 31553, Date:3/21/2023

Date: [3/21/2023](#).

Printed name of authorized officer or employee: [Andrea Mathie](#)

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

Telephone number of authorized officer or employee: [912-462-3126](#)

Study Area Code of Reporting Carrier:

[220347](#)

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

[03/31/2023](#)

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/14/2023

Date: [3/14/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 220348 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/22/2023

Date: [3/22/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

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

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

Signature of authorized officer or employee: [Darrell Harper](#)

Digitally signed by Darrell Harper DN:cn=Darrell Harper,email=darrellh@etcnow.com,O=ellijay tel. co.,l=Ellijay GA 30540, Date:3/22/2023

Date: [3/22/2023](#).

Printed name of authorized officer or employee: [Darrell Harper](#)

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

Telephone number of authorized officer or employee: [706-697-5519](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 220360 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

Digitally signed by Jill Johnson O'Brien DN:cn=Jill Johnson O'Brien,email=jilljohnsonobrien@gmail.com,O=glenwood tel. co.,l=, Date:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Jill Johnson O'Brien](#)

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

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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

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

Signature of authorized officer or employee: [Melissa F. Green](#)

Digitally signed by Melissa F. Green DN:cn=Melissa F. Green, email=melissa.green@htconline.net,O=hart tel. co.,l=Hartwell GA 30643, Date:3/17/2023

Date: [3/17/2023](#).

Printed name of authorized officer or employee: [Melissa F. Green](#)

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

Telephone number of authorized officer or employee: [706-856-2238](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 220368 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/17/2023 | | |
| Date: 3/17/2023 . | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

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

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

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

Signature of authorized officer or employee: [Stephen Milner](#)

Digitally signed by Stephen Milner DN:cn=Stephen Milner, email=sdmilner@planters.net, O=planters rural tel. coop., inc., l=Newington GA 30446, Date:3/14/2023

Date: [3/14/2023](#).

Printed name of authorized officer or employee: [Stephen Milner](#)

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

Telephone number of authorized officer or employee: [912-857-4411](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 220378 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

FCC Form 508
OMB Control No. 3060-0986

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

| | | | |
|---|---------------|--|-----------------------|
| <p>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | |
| Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u> | | | |
| Name of Reporting Carrier <u>Public Service Telephone Company</u> | | | |
| Signature of authorized officer or employee  | | | Date <u>3/29/2023</u> |
| Printed name of authorized officer or employee <u>James L. Bond</u> | | | |
| Title or position of authorized officer or employee <u>President</u> | | | |
| Telephone number of authorized officer or employee: (<u>478</u>) <u>847</u> - <u>4111</u> , ext. <u>6520</u> | | | |
| Study Area Code of Reporting Carrier | <u>220381</u> | Filing Due Date for this form (mm/dd/yyyy) | <u>3/31/2023</u> |
| <p>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/22/2023

Date: [3/22/2023](#).

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

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

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

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

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

Signature of authorized officer or employee: [Steven W. Tatum](#)

Digitally signed by Steven W. Tatum DN:cn=Steven W. Tatum,email=statum@tvn.net,O=trenton tel. co.,l=Trenton GA 30752, Date:3/22/2023

Date: [3/22/2023](#).

Printed name of authorized officer or employee: [Steven W. Tatum](#)

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

Telephone number of authorized officer or employee: [706-657-4367](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 220389 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/21/2023 | | |
| Date: 3/21/2023 . | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

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

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

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

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

Digitally signed by Laura Graff DN:cn=Laura Graff,email=lgraff@atmc.com,O=atlantic tel. memb. corp.,l=Shallotte NC 28459, Date:3/28/2023

Date: [3/28/2023](#).

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

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

Telephone number of authorized officer or employee: [910-755-1782](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 230468 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: CITIZENS TEL. CO.-NC | | | | |
| Signature of authorized officer or employee: Tara Thomas | | | 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:3/27/2023 | |
| Date: 3/27/2023 . | | | | |
| Printed name of authorized officer or employee: Tara Thomas | | | | |
| Title or position of authorized officer or employee: Regulatory Cost Analyst | | | | |
| Telephone number of authorized officer or employee: 803-326-6501 | | | | |
| Study Area Code of Reporting Carrier: | 230473 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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

Name of Reporting Carrier: [RANDOLPH TEL. MEMB. CORP. DBA RANDOLPH COMM.](#)

Signature of authorized officer or employee: [Brenda Hardee](#)

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:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Brenda Hardee](#)

Title or position of authorized officer or employee: [Revenue Assurance Specialist](#)

Telephone number of authorized officer or employee: [336-879-7946](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 230496 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=hanson@surrytel.com,O=surry telephone membership corporation,l=Dobson NC 27017, Date:3/17/2023

Date: [3/17/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/21/2023 | | |
| Date: 3/21/2023. | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

| | | | | | |
|--|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: Donna Bullard | | | Digitally signed by Donna Bullard DN:cn=Donna Bullard,email=dcbullard@stmc.net,O=star tel. memb. corp.,l=Clinton NC 28328, Date:3/14/2023 | | |
| Date: 3/14/2023. | | | | | |
| Printed name of authorized officer or employee: Donna Bullard | | | | | |
| Title or position of authorized officer or employee: Executive VP & CEO | | | | | |
| Telephone number of authorized officer or employee: 910-564-7862 | | | | | |
| Study Area Code of Reporting Carrier: | 230502 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=hanson@surrytel.com,O=surry telephone membership corporation,l=Dobson NC 27017, Date:3/17/2023

Date: [3/17/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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,=Wilkesboro NC 28697-2108, Date:3/20/2023

Date: [3/20/2023](#).

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)

[03/31/2023](#)

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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,=Wilkesboro NC 28697-2108, Date:3/20/2023

Date: [3/20/2023](#).

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)

[03/31/2023](#)

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

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

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

| | | | | | |
|---|------------------------|--|--|---|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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: Catherine Chambliss | | | | Digitally signed by Catherine Chambliss DN:cn=Catherine Chambliss,email=catherine.chambliss@zirus.com,O=yadkin valley tel. memb. corp.,l=Yadkinville NC 27055, Date:3/27/2023 | |
| Date: 3/27/2023. | | | | | |
| Printed name of authorized officer or employee: Catherine Chambliss | | | | | |
| Title or position of authorized officer or employee: Accounting Manager | | | | | |
| Telephone number of authorized officer or employee: 336-463-5127 | | | | | |
| Study Area Code of Reporting Carrier: | 230511 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

| | | | | | |
|---|------------------------|--|--|---|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/23/2023 | |
| Date: 3/23/2023. | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

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

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

Name of Reporting Carrier: [CHESNEE 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=chesnee tel. co.,l=Rock Hill SC 29730, Date:3/20/2023

Date: [3/20/2023](#).

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

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

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

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 240515 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

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

Name of Reporting Carrier: [CHESTER TEL. CO.-SC](#)

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

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:3/23/2023

Date: [3/23/2023](#).

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: | 240516 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/23/2023

Date: [3/23/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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

Title or position of authorized officer or employee: [Regulatory Cost 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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/23/2023

Date: [3/23/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

FCC Form 508
OMB Control No. 3060-0986

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

| | | | |
|---|---------------|--|------------------------|
| <p>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | |
| Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u> | | | |
| Name of Reporting Carrier <u>Horry Telephone Cooperative, Inc.</u> | | | |
| Signature of authorized officer or employee  | | | Date <u>03/21/2023</u> |
| Printed name of authorized officer or employee <u>Fred Reimer</u> | | | |
| Title or position of authorized officer or employee <u>Executive Director- Financial Operations</u> | | | |
| Telephone number of authorized officer or employee: (<u>843</u>) <u>365</u> - <u>2151</u> , ext. | | | |
| Study Area Code of Reporting Carrier | <u>240528</u> | Filing Due Date for this form (mm/dd/yyyy) | <u>3/31/2023</u> |
| <p>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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

Title or position of authorized officer or employee: [Regulatory Cost 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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

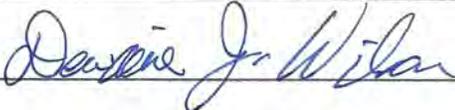
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: LOCKHART 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=lockhart tel. co.,inc.,l=Chester SC 29706-0160, Date:3/23/2023 | | |
| Date: 3/23/2023 . | | | | | |
| 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: | 240532 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

FCC Form 508
OMB Control No. 3060-0986

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

| | | | | |
|--|--|---|------------------------|--|
| <p>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</p> | | | | |
| <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u> | | | | |
| Name of Reporting Carrier <u>Palmetto Rural Telephone Cooperative, Inc.</u> | | | | |
| Signature of authorized officer or employee  | | | Date <u>03/24/2023</u> | |
| Printed name of authorized officer or employee <u>Dewaine J. Wilson</u> | | | | |
| Title or position of authorized officer or employee <u>CFO</u> | | | | |
| Telephone number of authorized officer or employee: (<u>843</u>) <u>538</u> - <u>9382</u> , ext. | | | | |
| Study Area Code of Reporting Carrier <u>240536</u> | | Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2023</u> | | |
| <p>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

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

FCC Form 508
OMB Control No. 3060-0986

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 | | | |
| <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>3/23/2023</u> |
| Printed name of authorized officer or employee <u>Randy Lis</u> | | | |
| Title or position of authorized officer or employee <u>General Manager</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>3/31/2023</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 | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: PBT TELECOM, INC. | | | | |
| Signature of authorized officer or employee: Tara Thomas | | | Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=pbt telecom,inc.,l=Rock Hill SC 29730, Date:3/20/2023 | |
| Date: 3/20/2023 . | | | | |
| Printed name of authorized officer or employee: Tara Thomas | | | | |
| Title or position of authorized officer or employee: Regulatory Cost Analyst | | | | |
| Telephone number of authorized officer or employee: 803-326-6501 | | | | |
| Study Area Code of Reporting Carrier: | 240539 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

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

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

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/23/2023 | |
| Date: 3/23/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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

Title or position of authorized officer or employee: [Regulatory Cost 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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

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

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

Signature of authorized officer or employee: [Allen Mills](#)

Digitally signed by Allen Mills DN:cn=Allen Mills,email=allen.mills@mysandhill.net,O=sandhill tel. coop.,inc.,l=Jefferson SC 29718, Date:3/22/2023

Date: [3/22/2023](#).

Printed name of authorized officer or employee: [Allen Mills](#)

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

Telephone number of authorized officer or employee: [843-658-6848](#)

Study Area Code of Reporting Carrier:

[240546](#)

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

[03/31/2023](#)

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

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

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

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

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

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

Name of Reporting Carrier **Castleberry Telephone Company**

Signature of authorized officer or employee *Homer Holland*

Date **03/22/2023**

Printed name of authorized officer or employee **Homer Holland**

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

Telephone number of authorized officer or employee: (**251**) **966** - **2110** , ext.

| | | | |
|--------------------------------------|---------------|--|------------------|
| Study Area Code of Reporting Carrier | 250285 | Filing Due Date for this form (mm/dd/yyyy) | 3/31/2023 |
|--------------------------------------|---------------|--|------------------|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Paul Higdon](#)

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

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=ecausey@hftfiber.com,O=hayneville tel. co.,inc.,l=Hayneville AL 36040, Date:3/21/2023

Date: [3/21/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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

Name of Reporting Carrier: [MON-CRE TEL. COOP. INC.](#)

Signature of authorized officer or employee: [Teresa Rich](#)

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:3/23/2023

Date: [3/23/2023](#).

Printed name of authorized officer or employee: [Teresa Rich](#)

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

Telephone number of authorized officer or employee: [334-562-3242](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 250305 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | |
|--|---------------|---|-----------------------|
| <p>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</p> | | | |
| <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | |
| <p>Name of Authorized Agent National Exchange Carrier Association, Inc.</p> | | | |
| <p>Moundville Telephone Company, Inc. dba Fastwyre Broadband</p> | | | |
| <p>Name of Reporting Carrier</p> | | | |
| <p><i>Stacy Hartman</i></p> | | | <p>Date 3/23/2023</p> |
| <p>Signature of authorized officer or employee</p> | | | |
| <p>Stacy Hartman</p> | | | |
| <p>Printed name of authorized officer or employee</p> | | | |
| <p>SVP Regulatory Affairs</p> | | | |
| <p>Title or position of authorized officer or employee</p> | | | |
| <p>Telephone number of authorized officer or employee: (720)370-2070</p> | | | |
| <p>Study Area Code of Reporting Carrier</p> | <p>250307</p> | <p>Filing Due Date for this form (mm/dd/yyyy)</p> | <p>3/23/2023</p> |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | |

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

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

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

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

Signature of authorized officer or employee: [Tammy Weeks](#)

Digitally signed by Tammy Weeks DN:cn=Tammy Weeks,email=tammy.weeks@nhtc.coop,O=new hope tel. coop., inc.-al,l=New Hope AL 35760, Date:3/23/2023

Date: [3/23/2023](#).

Printed name of authorized officer or employee: [Tammy Weeks](#)

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

Telephone number of authorized officer or employee: [256-723-2050](#)

Study Area Code of Reporting Carrier:

[250308](#)

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

[03/31/2023](#)

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

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

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

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

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

Digitally signed by Donna Counselman DN:cn=Donna Counselman,email=donna@pinebelt.net,O=pine belt tel. co.,l=Arlington AL 36722, Date:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Donna Counselman](#)

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

Telephone number of authorized officer or employee: [334-385-4025](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 250315 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/23/2023

Date: [3/23/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

Signature of authorized officer or employee 

Date **05/25/2023**

Printed name of authorized officer or employee **Robert Matthew Jackson**

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

Telephone number of authorized officer or employee: (205) 472 - 2141 , ext.

Study Area Code of Reporting Carrier

250316

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

June 2023

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 | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: BALLARD RURAL TEL. COOP. CORP., INC. | | | | |
| Signature of authorized officer or employee: Randy Grogan | | | Digitally signed by Randy Grogan DN:cn=Randy Grogan,email=randy.grogan@btc.coop,O=ballard rural tel. coop. corp.,inc.,l=La Center KY 42056-0209, Date:3/29/2023 | |
| Date: 3/29/2023 . | | | | |
| Printed name of authorized officer or employee: Randy Grogan | | | | |
| Title or position of authorized officer or employee: CEO/General Manager | | | | |
| Telephone number of authorized officer or employee: 270-665-5186 | | | | |
| Study Area Code of Reporting Carrier: | 260396 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

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

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

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: BRANDENBURG TEL. CO., INC. | | | | | |
| Signature of authorized officer or employee: Holly Mattingly | | | Digitally signed by Holly Mattingly DN:cn=Holly Mattingly,email=hmattingly@bbtel.com,O=brandenburg tel. co.,inc.,l=Brandenburg KY 40108, Date:3/14/2023 | | |
| Date: 3/14/2023 . | | | | | |
| Printed name of authorized officer or employee: Holly Mattingly | | | | | |
| Title or position of authorized officer or employee: Accounting Supervisor | | | | | |
| Telephone number of authorized officer or employee: 270-422-2121 | | | | | |
| Study Area Code of Reporting Carrier: | 260398 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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@duobroadband.com, O=duo county tel. coop., inc., l=Jamestown KY 42642, Date:3/14/2023

Date: [3/14/2023](#).

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: [700-343-1111](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 260401 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | |
|--|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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.,inc.,l=Staffordville KY 41256, Date:3/24/2023 | |
| Date: 3/24/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

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

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

Name of Reporting Carrier: [GEARHEART COMM. DBA COALFIELDS TEL. CO.](#)

Signature of authorized officer or employee: [Elizabeth Howell](#)

Digitally signed by Elizabeth Howell DN:cn=Elizabeth Howell, email=ehowell@gearheart.com, O=gearheart comm. dba coalfields tel. co., | = , Date: 3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Elizabeth Howell](#)

Title or position of authorized officer or employee: [Admin Asst.](#)

Telephone number of authorized officer or employee: [606-479-6253](#)

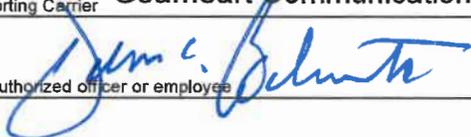
| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 260408 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 **Gearheart Communications Inc dba Coalfields Telephone**

Signature of authorized officer or employee  Date **08-09-23**

Printed name of authorized officer or employee **John Schmoltd**

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

Telephone number of authorized officer or employee: (606) 479 - 6254 , ext.

| | | | |
|--------------------------------------|--------|--|-------------|
| Study Area Code of Reporting Carrier | 260408 | Filing Due Date for this form (mm/dd/yyyy) | August 2023 |
|--------------------------------------|--------|--|-------------|

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: [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@ltconnect.com, O=logan tel. coop., inc., l=Auburn KY 42206-0097, Date:3/29/2023

Date: [3/29/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 260413 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

Digitally signed by Hope Barker DN:cn=Hope Barker,email=hbarker@mountaintelephone.com,O=mountain rural tel. coop. corp., inc.,l=West Liberty KY 41472, Date:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Hope Barker](#)

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

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

FCC Form 508
OMB Control No. 3060-0986

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

| | | | | |
|---|--|--|---------------------|--|
| <p>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u> | | | | |
| Name of Reporting Carrier <u>Peoples Rural Telephone Coop</u> | | | | |
| Signature of authorized officer or employee <u>Cheestine Duncan</u> | | | Date <u>3-21-23</u> | |
| Printed name of authorized officer or employee <u>Christine Duncan</u> | | | | |
| Title or position of authorized officer or employee <u>CFO</u> | | | | |
| Telephone number of authorized officer or employee: <u>(606) 287-5485 ext.</u> | | | | |
| Study Area Code of Reporting Carrier <u>260415</u> | | Filing Due Date for this form (mm/dd/yyyy) | 3/31/2023 | |
| <p>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

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

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

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

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

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

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:3/28/2023

Date: [3/28/2023](#).

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

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

Telephone number of authorized officer or employee: [270-678-8230](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 260418 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

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

Name of Reporting Carrier: [THACKER/GRIGSBY TEL. CO., INC.](#)

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

Digitally signed by Kimberly Jones DN:cn=Kimberly Jones,email=k.jones@tgtel.net,O=thacker/grigsby tel. co.,inc.,l=Hindman KY 41822, Date:3/16/2023

Date: [3/16/2023](#).

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

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

Telephone number of authorized officer or employee: [606-785-9500](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 260419 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

Digitally signed by Robert L. Hutter DN:cn=Robert L. Hutter, email=rhutter@mywkt.coop, O=west ky. rural tel. coop. corp., inc., l=Mayfield KY 42066, Date:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Robert L. Hutter](#)

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

Telephone number of authorized officer or employee: [270-558-0420](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 260421 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

FCC Form 508
OMB Control No. 3060-0986

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

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

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

Name of Authorized Agent National Exchange Carrier Association, Inc.

Name of Reporting Carrier Delcambre Tel Co.

Signature of authorized officer or employee Marcy Landry Date 3/22/23

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 ext.

| | | | |
|--------------------------------------|---------------|--|------------------|
| Study Area Code of Reporting Carrier | <u>210428</u> | Filing Due Date for this form (mm/dd/yyyy) | <u>3/31/2023</u> |
|--------------------------------------|---------------|--|------------------|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/24/2023

Date: [3/24/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

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

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

Signature of authorized officer or employee: [Mike George](#)

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:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Mike George](#)

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

Telephone number of authorized officer or employee: [318-874-7011](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 270435 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | | |
|---|------------------------|--|--|--|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/23/2023 | |
| Date: 3/23/2023. | | | | | |
| 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) | 03/31/2023 | |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | | |

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

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

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

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

Signature of authorized officer or employee: [Tim Roth](#)

Digitally signed by Tim Roth DN:cn=Tim Roth,email=troth@directcom.com,O=star tel. co., inc.,l=Rockland ID 83271, Date:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Tim Roth](#)

Title or position of authorized officer or employee: [Analyst & Special Projects Manager](#)

Telephone number of authorized officer or employee: [208-945-8006](#)

Study Area Code of Reporting Carrier:

[270441](#)

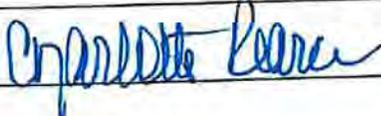
Filing Due Date for this form (mm/dd/yyyy)

[03/31/2023](#)

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

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

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

| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | |
|--|--|---|----------------------|
| <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | |
| Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u> | | | |
| Name of Reporting Carrier <u>NOXAPATER TELEPHONE COMPANY</u> | | | |
| Signature of authorized officer or employee  | | | Date <u>3/9/2023</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>(601 764-3171</u> . ext. | | | |
| Study Area Code of Reporting Carrier <u>280461</u> | | Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2023</u> | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. § 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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: Robert L. Hutter | | | Digitally signed by Robert L. Hutter DN:cn=Robert L. Hutter, email=rhutter@mywkt.coop, O=ardmore tel. co., inc., l=Mayfield KY 42066, Date:3/15/2023 | |
| Date: 3/15/2023 . | | | | |
| Printed name of authorized officer or employee: Robert L. Hutter | | | | |
| Title or position of authorized officer or employee: Chief Financial Officer | | | | |
| Telephone number of authorized officer or employee: 270-558-0420 | | | | |
| Study Area Code of Reporting Carrier: | 290280 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

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

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

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

Signature of authorized officer or employee: [Tammy McKinney](#)

Digitally signed by Tammy McKinney DN:cn=Tammy McKinney,email=tmckinney@benlomand.net,O=ben lomand rural tel. coop., inc.,l=McMinnville TN 37110, Date:3/19/2023

Date: [3/19/2023](#).

Printed name of authorized officer or employee: [Tammy McKinney](#)

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

Telephone number of authorized officer or employee: [931-668-4131](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 290553 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023.](#)

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

Title or position of authorized officer or employee: [Billing & Revenue Assurance Manager](#)

Telephone number of authorized officer or employee: [423-447-1295](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 290554 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023

Date: [3/21/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

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

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

Signature of authorized officer or employee: [Johnny McClanahan](#)

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:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Johnny McClanahan](#)

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

Telephone number of authorized officer or employee: [615-666-2151](#)

Study Area Code of Reporting Carrier:

[290573](#)

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

[03/31/2023](#)

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

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

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

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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: Joanna Williams | | | Digitally signed by Joanna Williams DN:cn=Joanna Williams,email=jwilliams@twlakes.coop,O=twin lakes tel. coop.,l=Gainesboro TN 38562, Date:3/21/2023 | |
| Date: 3/21/2023. | | | | |
| Printed name of authorized officer or employee: Joanna Williams | | | | |
| Title or position of authorized officer or employee: Controller | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

Digitally signed by Robert L. Hutter DN:cn=Robert L. Hutter,email=rhutter@mywkt.coop,O=west kentucky rural telephone coop. corp.-tn,l=Mayfield KY 42066, Date:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Robert L. Hutter](#)

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

Telephone number of authorized officer or employee: [270-558-0420](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 290598 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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

Digitally signed by Eric Roughton DN:cn=Eric Roughton,email=artelco@bright.net,O=the arthur mutual tel. co.,l=Defiance OH 43512, Date:3/15/2023

Date: [3/15/2023](#).

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

Title or position of authorized officer or employee: [General Manager/Sec'y/Treasurer](#)

Telephone number of authorized officer or employee: [419-393-2233](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 300586 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: AYERSVILLE TEL. CO. | | | | |
| Signature of authorized officer or employee: Phil Maag | | | Digitally signed by Phil Maag DN:cn=Phil Maag,email=pmaag@ayersvilletelco.com,O=ayersville tel. co.,l=Defiance OH 43512, Date:3/21/2023 | |
| Date: 3/21/2023. | | | | |
| Printed name of authorized officer or employee: Phil Maag | | | | |
| Title or position of authorized officer or employee: Sec./Treas. & General Manager | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023

Date: [3/21/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023

Date: [3/21/2023](#).

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)

[03/31/2023](#)

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

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

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

| | | | | |
|--|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 CHAMPAIGN TEL. CO. | | | | |
| Signature of authorized officer or employee: Tiffany Ebersold | | | Digitally signed by Tiffany Ebersold DN:cn=Tiffany Ebersold,email=tiffany@ctcommunications.com,O=the champaign tel. co.,l=Urbana OH 43078, Date:3/16/2023 | |
| Date: 3/16/2023 . | | | | |
| Printed name of authorized officer or employee: Tiffany Ebersold | | | | |
| Title or position of authorized officer or employee: Chief Financial Officer | | | | |
| Telephone number of authorized officer or employee: 937-653-2263 | | | | |
| Study Area Code of Reporting Carrier: | 300594 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/21/2023 | |
| Date: 3/21/2023. | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/20/2023 | | |
| Date: 3/20/2023. | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

| | | | | | |
|--|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/22/2023 | | |
| Date: 3/22/2023 . | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023

Date: [3/21/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: FORT JENNINGS TEL. CO. | | | | |
| Signature of authorized officer or employee: Michael Metzger | | | 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:3/23/2023 | |
| Date: 3/23/2023 . | | | | |
| Printed name of authorized officer or employee: Michael Metzger | | | | |
| Title or position of authorized officer or employee: General Manager | | | | |
| Telephone number of authorized officer or employee: 419-286-2181 | | | | |
| Study Area Code of Reporting Carrier: | 300614 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

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

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

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

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

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

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

Signature of authorized officer or employee: [David L. Hunt](#)

Digitally signed by David L. Hunt DN:cn=David L. Hunt,email=hunt@d@bright.net,O=glandorf tel. co., inc.,l=Glandorf OH 45848, Date:3/21/2023

Date: [3/21/2023](#).

Printed name of authorized officer or employee: [David L. Hunt](#)

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

Telephone number of authorized officer or employee: [419-538-6987](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 300619 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023](#).

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)

[03/31/2023](#)

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/21/2023 | | |
| Date: 3/21/2023. | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/22/2023

Date: [3/22/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | | |
|--|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: Michael Fitzpatrick | | | Digitally signed by Michael Fitzpatrick DN:cn=Michael Fitzpatrick,email=mfitzpatrick@blanchardtel.com,O=blanchard telephone co.,l=Blanchard MI 49310, Date:3/17/2023 | | |
| Date: 3/17/2023. | | | | | |
| Printed name of authorized officer or employee: Michael Fitzpatrick | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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=swshults@bloomingtondalecom.net,O=bloomingtondale tel. co.,l=Bloomingtondale MI 49026, Date:3/17/2023 | | |
| Date: 3/17/2023 . | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

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

Digitally signed by Rachel Paolillo DN:cn=Rachel Paolillo,email=rachel.paolillo@metronet.com,O=climax tel. co.,l=Overland Park KS 66214, Date:3/22/2023

Date: [3/22/2023](#).

Printed name of authorized officer or employee: [Rachel Paolillo](#)

Title or position of authorized officer or employee: [Director of Tax & Reg. Compliance](#)

Telephone number of authorized officer or employee: [913-794-3130](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 310688 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/20/2023 | |
| Date: 3/20/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

Signature of authorized officer or employee: [Kristen K Fisher](#)

Digitally signed by Kristen K Fisher DN:cn=Kristen K Fisher, email=fisher@ogdentel.com, O=ogden tel. co., l=Blissfield MI 49228, Date:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Kristen K Fisher](#)

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

Telephone number of authorized officer or employee: [517-443-5595](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 310714 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

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

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

Signature of authorized officer or employee: [Neal B. Eichler](#)

Digitally signed by Neal B. Eichler DN:cn=Neal B. Eichler, email=naeic@avci.net, O=pigeon tel. co., l=Pigeon MI 48755, Date:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Neal B. Eichler](#)

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

Telephone number of authorized officer or employee: [989-453-4391](#)

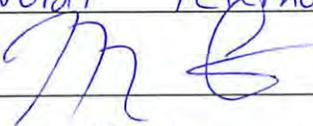
| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 310721 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

FCC Form 508
OMB Control No. 3060-0986

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

| | | | |
|---|---------------|--|-----------------------|
| <p>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | |
| Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u> | | | |
| Name of Reporting Carrier <u>SPRINGPORT Telephone Company</u> | | | |
| Signature of authorized officer or employee  | | | Date <u>3-24-2023</u> |
| Printed name of authorized officer or employee <u>MARK CUTLER</u> | | | |
| Title or position of authorized officer or employee <u>Treasurer</u> | | | |
| Telephone number of authorized officer or employee: (<u>517</u>) <u>857-3100</u> , ext. | | | |
| Study Area Code of Reporting Carrier | <u>310728</u> | Filing Due Date for this form (mm/dd/yyyy) | 3/31/2023 |
| <p>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | |

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

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

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: WALDRON TEL. CO. | | | | |
| Signature of authorized officer or employee: Lucinda Bernath | | | Digitally signed by Lucinda Bernath DN:cn=Lucinda Bernath,email=cindy@waldrontel.com,O=waldron tel. co.,l=Waldron MI 49288-0197, Date:3/16/2023 | |
| Date: 3/16/2023 . | | | | |
| Printed name of authorized officer or employee: Lucinda Bernath | | | | |
| Title or position of authorized officer or employee: Vice President | | | | |
| Telephone number of authorized officer or employee: 517-286-6211 | | | | |
| Study Area Code of Reporting Carrier: | 310734 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

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

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

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

Signature of authorized officer or employee: [Mark Graf](#)

Digitally signed by Mark Graf DN:cn=Mark Graf,email=mgraf@winntel.com,O=winn tel. co.,I=Winn MI 48896, Date:3/24/2023

Date: [3/24/2023](#).

Printed name of authorized officer or employee: [Mark Graf](#)

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

Telephone number of authorized officer or employee: [989-953-9876](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 310737 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

Digitally signed by Cammy Ackley DN:cn=Cammy Ackley,email=cammy@citiznet.com,O=citizens tel. corp.-warren,l=Warren IN 46792, Date:3/21/2023

Date: [3/21/2023](#).

Printed name of authorized officer or employee: [Cammy Ackley](#)

Title or position of authorized officer or employee: [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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 ct. rural tel coop inc d/b/a endeavor,l=Cloverdale IN 46120-0237, Date:3/27/2023

Date: [3/27/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/20/2023 | |
| Date: 3/20/2023 . | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

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

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

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: DAVIESS-MARTIN CTY. RURAL TEL. DBA RTC COMM. | | | | | |
| Signature of authorized officer or employee: Kirk Lehman | | | 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:3/17/2023 | | |
| Date: 3/17/2023 . | | | | | |
| Printed name of authorized officer or employee: Kirk Lehman | | | | | |
| Title or position of authorized officer or employee: CEO/Executive VP | | | | | |
| Telephone number of authorized officer or employee: 812-486-3211 | | | | | |
| Study Area Code of Reporting Carrier: | 320759 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/16/2023

Date: [3/16/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

Steven J Scott

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 | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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: Dana Drew | | | Digitally signed by Dana Drew DN:cn=Dana Drew,email=ddrew@ninstarconnect.com,O=hancock rural tel. corp. dba ninestar connect, =Greenfield IN 46140, Date:3/15/2023 | | |
| Date: 3/15/2023 . | | | | | |
| Printed name of authorized officer or employee: Dana Drew | | | | | |
| Title or position of authorized officer or employee: Accounting Manager | | | | | |
| Telephone number of authorized officer or employee: 317-323-2233 | | | | | |
| Study Area Code of Reporting Carrier: | 320775 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

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

Digitally signed by Mike Troup DN:cn=Mike Troup,email=mtroup@ligtel.net,O=Ligonier tel. co.,l=Ligonier IN 46767, Date:3/22/2023

Date: [3/22/2023](#).

Printed name of authorized officer or employee: [Mike Troup](#)

Title or position of authorized officer or employee: [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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | |
|--|------------------------|--|--|---|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4). | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: MONON TEL. CO., INC. | | | | |
| Signature of authorized officer or employee: Bruce Hanway | | | | Digitally signed by Bruce Hanway DN:cn=Bruce Hanway,email=bruceh@urhere.net,O=monon tel. co., inc.,l=Monon IN 47959, Date:3/17/2023 |
| Date: 3/17/2023 . | | | | |
| Printed name of authorized officer or employee: Bruce Hanway | | | | |
| Title or position of authorized officer or employee: Secretary/Treasurer | | | | |
| Telephone number of authorized officer or employee: 219-253-6601 | | | | |
| Study Area Code of Reporting Carrier: | 320790 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

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

Digitally signed by Greg Maish DN:cn=Greg Maish,email=gregmaish@mintel.net,O=mulberry coop. tel. co.,inc.,l=Mulberry IN 46058-0370, Date:3/23/2023

Date: [3/23/2023](#).

Printed name of authorized officer or employee: [Greg 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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: NEW LISBON TEL. CO., INC. | | | | |
| Signature of authorized officer or employee: John Greene | | | 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:3/17/2023 | |
| Date: 3/17/2023. | | | | |
| Printed name of authorized officer or employee: John Greene | | | | |
| Title or position of authorized officer or employee: CEO | | | | |
| Telephone number of authorized officer or employee: 765-332-2413 | | | | |
| Study Area Code of Reporting Carrier: | 320796 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

| | | | | |
|--|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 PARIS TEL., INC. | | | | |
| Signature of authorized officer or employee: Paul Penrose | | | 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:3/23/2023 | |
| Date: 3/23/2023 . | | | | |
| Printed name of authorized officer or employee: Paul Penrose | | | | |
| Title or position of authorized officer or employee: CFO | | | | |
| Telephone number of authorized officer or employee: 574-831-7115 | | | | |
| Study Area Code of Reporting Carrier: | 320797 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

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

Digitally signed by Sharon McKay DN:cn=Sharon McKay,email=smckay@nitco.com,O=northwestern indiana tel. co.,inc.,l=Hebron IN 46341, Date:3/27/2023

Date: [3/27/2023](#).

Printed name of authorized officer or employee: [Sharon McKay](#)

Title or position of authorized officer or employee: [Business Office/Regulatory Mgr](#)

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

Digitally signed by Kelly Schwoeppee DN:cn=Kelly Schwoeppee,email=kschwoeppe@pscfiber.net,O=perry-spencer rural tel. coop., inc. dba psc,l=St. Meinrad IN 47577, Date:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Kelly Schwoeppee](#)

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

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

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

Name of Reporting Carrier: [PULASKI-WHITE RURAL TEL. COOP.dba LIGHTSTREAM](#)

Signature of authorized officer or employee: [Brent Gillum](#)

Digitally signed by Brent Gillum DN:cn=Brent Gillum,email=bgillum@pwrct.net,O=pulaski-white rural tel. coop.dba lightstream,l=Buffalo IN 47925, Date:3/27/2023

Date: [3/27/2023](#).

Printed name of authorized officer or employee: [Brent Gillum](#)

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

Telephone number of authorized officer or employee: [574-278-7121](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 320813 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

Digitally signed by Tyson B. Kalischuk DN:cn=Tyson B. Kalischuk, email=tyson.kalischuk@rtc1.com,O=rochester tel. co., inc.,l=Rochester IN 46975, Date:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Tyson B. Kalischuk](#)

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

Telephone number of authorized officer or employee: [574-223-0241](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 320815 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 indianana rural tel. coop., inc.,l=Dillsboro IN 47018-0007, Date:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

Digitally signed by Rodney Thiemann DN:cn=Rodney Thiemann,email=rthiemann@gpcom.com,O=sunman telecommunications llc,l=Blair NE 68008-0500, Date:3/21/2023

Date: [3/21/2023](#).

Printed name of authorized officer or employee: [Rodney Thiemann](#)

Title or position of authorized officer or employee: [Sr. Director-Regulatory Finance](#)

Telephone number of authorized officer or employee: [402-426-6433](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 320825 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/15/2023 | | |
| Date: 3/15/2023. | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

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

Digitally signed by Lynn Hess DN:cn=Lynn Hess,email=lynnhess@comteck.com,O=sweetser rural tel. co.,inc.,l=Sweetser IN 46987, Date:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Lynn Hess](#)

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

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

Digitally signed by Christopher A Broy DN:cn=Christopher A Broy,email=chris.broy@telemedia.coop,O=wash. cty. rural tel. coop.,inc.,l=Salem IN 47167, Date:3/29/2023

Date: [3/29/2023](#).

Printed name of authorized officer or employee: [Christopher A Broy](#)

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

Telephone number of authorized officer or employee: [812-967-5501](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 320834 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

Digitally signed by Tonya O'Farrell DN:cn=Tonya O'Farrell,email=ofarrell@ytci.com,O=yeoman tel. co., inc.,l=Yeoman IN 47997, Date:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Tonya O'Farrell](#)

Title or position of authorized officer or employee: [Financial 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)

[03/31/2023](#)

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/23/2023

Date: [3/23/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

Digitally signed by Linda Garbelman DN:cn=Linda Garbelman,email=lgarbelman@experiencemosaic.com,O=chibardun tel. coop., inc.,l=Cameron WI 54822, Date:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Linda Garbelman](#)

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

Telephone number of authorized officer or employee: [715-458-5350](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 330861 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/16/2023

Date: [3/16/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 330863 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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: Shawn Squires | | | Digitally signed by Shawn Squires DN:cn=Shawn Squires,email=s.squires@cochranetel.com,O=cochrane coop. tel. co.,l=Cochrane WI 54622-0189, Date:3/20/2023 | | |
| Date: 3/20/2023 . | | | | | |
| Printed name of authorized officer or employee: Shawn Squires | | | | | |
| Title or position of authorized officer or employee: CEO | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

| | | | | | |
|---|------------------------|--|--|---|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: LAKEFIELD TELEPHONE COMPANY | | | | | |
| Signature of authorized officer or employee: Jim Paulos | | | | Digitally signed by Jim Paulos DN:cn=Jim Paulos, email=jim.paulos@nsight.com, O=lakefield telephone company, l=Green Bay WI 54313, Date:3/16/2023 | |
| Date: 3/16/2023. | | | | | |
| Printed name of authorized officer or employee: Jim Paulos | | | | | |
| Title or position of authorized officer or employee: Fixed Operations Manager | | | | | |
| Telephone number of authorized officer or employee: 920-617-7085 | | | | | |
| Study Area Code of Reporting Carrier: | 330896 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | | |

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

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

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

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

Signature of authorized officer or employee: [Gregory Rockweiler](#)

Digitally signed by Gregory Rockweiler DN:cn=Gregory Rockweiler,email=gregr@lvc.coop,O=la valle tel. coop.,l=La Valle WI 53941-0028, Date:3/17/2023

Date: [3/17/2023](#).

Printed name of authorized officer or employee: [Gregory Rockweiler](#)

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

Telephone number of authorized officer or employee: [608-985-7201](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 330899 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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

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

Signature of authorized officer or employee: [Donna Rezin](#)

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:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Donna Rezin](#)

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

Telephone number of authorized officer or employee: [608-427-6515](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 330900 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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@lakelandteam.com, O=lakeland communications group, llc, l=Milltown WI 54858, Date:3/15/2023 | | |
| Date: 3/15/2023 . | | | | | |
| Printed name of authorized officer or employee: Crystal Morley | | | | | |
| Title or position of authorized officer or employee: Controller | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

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

Digitally signed by Darren Moser DN:cn=Darren Moser,email=dmoser@maadtelco.com,O=marquette-adams tel. coop., inc.,l=Oxford WI 53952, Date:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Darren Moser](#)

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 **MARQUETTE-ADAMS TEL. COOP., INC.**

Signature of authorized officer or employee  Date **7/6/23**

Printed name of authorized officer or employee **Darren D Moser**

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

Telephone number of authorized officer or employee: (**608**) **586** - **4111** , ext.

| | | | |
|--------------------------------------|---------------|--|-----------|
| Study Area Code of Reporting Carrier | 330908 | Filing Due Date for this form (mm/dd/yyyy) | July 2023 |
|--------------------------------------|---------------|--|-----------|

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: [NELSON COMMUNICATIONS COOPERATIVE](#)

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

Digitally signed by Laura Gullickson DN:cn=Laura Gullickson,email=laura@ntec.net,O=nelson communications cooperative,l=Durand WI 54736-0228, Date:3/15/2023

Date: [3/15/2023](#).

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

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

Telephone number of authorized officer or employee: [715-672-4204](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 330918 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: NIAGARA TELEPHONE COMPANY | | | | | |
| Signature of authorized officer or employee: Jim Paulos | | | Digitally signed by Jim Paulos DN:cn=Jim Paulos,email=jim.paulos@nsight.com,O=niagara telephone company,l=Green Bay WI 54313, Date:3/16/2023 | | |
| Date: 3/16/2023 . | | | | | |
| Printed name of authorized officer or employee: Jim Paulos | | | | | |
| Title or position of authorized officer or employee: Fixed Operations Manager | | | | | |
| Telephone number of authorized officer or employee: 920-617-7085 | | | | | |
| Study Area Code of Reporting Carrier: | 330920 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: BAYLAND TELEPHONE, LLC | | | | |
| Signature of authorized officer or employee: Jim Paulos | | | Digitally signed by Jim Paulos DN:cn=Jim Paulos, email=jim.paulos@nsight.com, O=bayland telephone, llc, l=Green Bay WI 54313, Date:3/16/2023 | |
| Date: 3/16/2023 . | | | | |
| Printed name of authorized officer or employee: Jim Paulos | | | | |
| Title or position of authorized officer or employee: Fixed Operations Manager | | | | |
| Telephone number of authorized officer or employee: 920-617-7085 | | | | |
| Study Area Code of Reporting Carrier: | 330925 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/23/2023 | |
| Date: 3/23/2023 . | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

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

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

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

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

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

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

Signature of authorized officer or employee: **Jim Paulos**

Digitally signed by Jim Paulos DN:cn=Jim Paulos, email=jim.paulos@nsight.com, O=northeast tel. co., l=Green Bay WI 54313, Date:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Jim Paulos](#)

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

Telephone number of authorized officer or employee: [920-617-7085](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 330938 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/16/2023 | |
| Date: 3/16/2023. | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

| | | | | |
|--|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023 | |
| Date: 3/21/2023. | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Carol Anderson](#)

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

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

Digitally signed by Jim Kusilek DN:cn=Jim Kusilek,email=jkusilek@wwt.coop,O=west wisconsin telcom coop.,inc.,l=Downsville WI 54735, Date:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Jim Kusilek](#)

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023

Date: [3/21/2023](#).

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:

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 330974 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/16/2023

Date: [3/16/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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=gmtc@joink.com, O=the grandview mutual tel. co., l=Paris IL 61944, Date:3/20/2023 | |
| Date: 3/20/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/16/2023

Date: [3/16/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

Digitally signed by Craig Hern DN:cn=Craig
 Hern,email=chern@htc.net,O=harrisonville tel. co.,l= , Date:3/23/2023

Date: [3/23/2023](#).

Printed name of authorized officer or employee: [Craig Hern](#)

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

Telephone number of authorized officer or employee: [618-939-9219](#)

Study Area Code of Reporting Carrier:

[341026](#)

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

[03/31/2023](#)

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

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

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

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

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

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

Digitally signed by Eric Schmidt DN:cn=Eric Schmidt,email=eschmidt@hometel.com,O=home telephone company-st. jacob,l=St. Jacob IL 62281, Date:3/27/2023

Date: [3/27/2023](#).

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

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

Telephone number of authorized officer or employee: [618-644-2111](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 341032 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | |
|--|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: Mark Irish | | | Digitally signed by Mark Irish DN:cn=Mark Irish,email=mark@laharpetelephone.com,O=la harpe tel. co.,l=LaHarpe IL 61450, Date:3/23/2023 | |
| Date: 3/23/2023. | | | | |
| Printed name of authorized officer or employee: Mark 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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@lrcnet1.com,O=leaf river tel. co.,l=Leaf River IL 61047, Date:3/20/2023

Date: [3/20/2023](#).

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: [608-220-1587](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 341045 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/16/2023 | | |
| Date: 3/16/2023 . | | | | | |
| 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) | 03/31/2023 | |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | | |

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

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

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: MADISON TEL. CO. | | | | |
| Signature of authorized officer or employee: Carrie Lewis | | | Digitally signed by Carrie Lewis DN:cn=Carrie Lewis,email=clewis@gomadison.com,O=madison tel. co.,l=Staunton IL 62088, Date:3/21/2023 | |
| Date: 3/21/2023. | | | | |
| Printed name of authorized officer or employee: Carrie Lewis | | | | |
| Title or position of authorized officer or employee: Director of Reg & Finance | | | | |
| Telephone number of authorized officer or employee: 618-635-5000 | | | | |
| Study Area Code of Reporting Carrier: | 341049 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/28/2023

Date: [3/28/2023](#).

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)

[03/31/2023](#)

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

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

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

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

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

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

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

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=metamora tel. co.,l=Metamora IL 61548-0800, Date:3/28/2023

Date: [3/28/2023](#).

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: | 341053 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: MONTROSE MUTUAL TEL. CO. | | | | | |
| Signature of authorized officer or employee: Cheryl Gaither | | | Digitally signed by Cheryl Gaither DN:cn=Cheryl Gaither,email=cherylg@wabash.net,O=montrose mutual tel. co.,l=Louisville IL 62858, Date:3/20/2023 | | |
| Date: 3/20/2023 . | | | | | |
| Printed name of authorized officer or employee: Cheryl Gaither | | | | | |
| Title or position of authorized officer or employee: Regulatory Affairs/CABS Coordinator | | | | | |
| Telephone number of authorized officer or employee: 618-665-3311 | | | | | |
| Study Area Code of Reporting Carrier: | 341058 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/17/2023 | | |
| Date: 3/17/2023. | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

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

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

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

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

Digitally signed by Cheryl Gaither DN:cn=Cheryl Gaither,email=cherylg@wabash.net,O=wabash tel coop, inc. dba wabash comm co-op,l=Louisville IL 62858, Date:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Cheryl Gaither](#)

Title or position of authorized officer or employee: [Regulatory Affairs/CABS Coordinator](#)

Telephone number of authorized officer or employee: [618-665-3311](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 341088 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/17/2023

Date: [3/17/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351106 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

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

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

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

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

Name of Reporting Carrier: [CASCADE COMMUNICATIONS COMPANY](#)

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

Digitally signed by Chris Summerall DN:cn=Chris Summerall,email=chris@cascadecomm.com,O=cascade communications company,I=Cascade IA 52033-0250, Date:3/15/2023

Date: [3/15/2023](#).

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

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

Telephone number of authorized officer or employee: [563-852-3710](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351118 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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@ctel.com,O=clear lake indp. tel. co.,l=Clear Lake IA 50428-0066, Date:3/22/2023

Date: [3/22/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351132 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

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

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

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

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

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

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

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

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

Digitally signed by Randy Shane Bellon DN:cn=Randy Shane Bellon, email=shane@colotel.org, O=colo tel. co., l=Colo IA 50056, Date:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Randy Shane Bellon](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [641-377-2202](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351134 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

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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 | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023 | |
| Date: 3/15/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/14/2023

Date: [3/14/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351153 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/23/2023

Date: [3/23/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351157 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/24/2023 | |
| Date: 3/24/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 COOP. TEL. CO.-DYSART](#)

Signature of authorized officer or employee: [Shelly Franzenburg](#)

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:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Shelly Franzenburg](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [319-476-7800](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351162 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/16/2023

Date: [3/16/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Melanie Johanns](#)

Digitally signed by Melanie Johanns DN:cn=Melanie Johanns,email=mjohanns@omnitel.biz,O=farmers mutual tel. co.-nora springs,l=Nora Springs IA 50458-0518, Date:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Melanie Johanns](#)

Title or position of authorized officer or employee: [Director of Accounting](#)

Telephone number of authorized officer or employee: [641-749-2531](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351172 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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. COOP.-SHELLSBURG](#)

Signature of authorized officer or employee: [Curtis Eldred](#)

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:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Curtis Eldred](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [319-436-2224](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351173 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/17/2023

Date: [3/17/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Vince Tyson](#)

Digitally signed by Vince Tyson DN:cn=Vince Tyson,email=vtyson@mycmtech.com,O=farmers tel. co.-batavia,l=Bloomfield IA 52537, Date:3/21/2023

Date: [3/21/2023](#).

Printed name of authorized officer or employee: [Vince Tyson](#)

Title or position of authorized officer or employee: [General Manager](#)

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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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: Melanie Johanns | | | Digitally signed by Melanie Johanns DN:cn=Melanie Johanns,email=mjohanns@omnitel.biz,O=farmers tel. co.-riceville,l=Nora Springs IA 50458-0518, Date:3/15/2023 | |
| Date: 3/15/2023. | | | | |
| Printed name of authorized officer or employee: Melanie Johanns | | | | |
| Title or position of authorized officer or employee: Director of Accounting | | | | |
| Telephone number of authorized officer or employee: 641-749-2531 | | | | |
| Study Area Code of Reporting Carrier: | 351177 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4). | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: GOLDFIELD TEL. CO. | | | | |
| Signature of authorized officer or employee: Jacob Berte | | | Digitally signed by Jacob Berte DN:cn=Jacob Berte,email=jberte@ganiowa.com,O=goldfield tel. co.,l=Kanawha IA 50447, Date:3/22/2023 | |
| Date: 3/22/2023 . | | | | |
| Printed name of authorized officer or employee: Jacob Berte | | | | |
| Title or position of authorized officer or employee: Accountant | | | | |
| Telephone number of authorized officer or employee: 641-762-3772 | | | | |
| Study Area Code of Reporting Carrier: | 351188 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/15/2023 | | |
| Date: 3/15/2023. | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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,l=Huxley IA 50124-0036, Date:3/24/2023

Date: [3/24/2023](#).

Printed name of authorized officer or employee: [Levi Bappe](#)

Title or position of authorized officer or employee: [General Manager and Excutive 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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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: Tim Toepfer | | | Digitally signed by Tim Toepfer DN:cn=Tim Toepfer, email=tttoepfer@iamo.tel, O=iamo communications, inc.-ia, l=Coin IA 51636, Date:3/17/2023 | |
| Date: 3/17/2023 . | | | | |
| Printed name of authorized officer or employee: Tim Toepfer | | | | |
| Title or position of authorized officer or employee: CEO & General Manage | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: FMTC-I35, INC. | | | | |
| Signature of authorized officer or employee: Melanie Johanns | | | Digitally signed by Melanie Johanns DN:cn=Melanie Johanns,email=mjohanns@omnitel.biz,O=fmtc-i35, inc.,I=Nora Springs IA 50458-0518, Date:3/15/2023 | |
| Date: 3/15/2023. | | | | |
| Printed name of authorized officer or employee: Melanie Johanns | | | | |
| Title or position of authorized officer or employee: Director of Accounting | | | | |
| Telephone number of authorized officer or employee: 641-749-2531 | | | | |
| Study Area Code of Reporting Carrier: | 351209 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|--|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4). | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: KALONA COOP. TEL. CO. | | | | | |
| Signature of authorized officer or employee: Casey Peck | | | Digitally signed by Casey Peck DN:cn=Casey Peck,email=casey.peck@kctc.net,O=kalona coop. tel. co.,l=Kalona IA 52247-1208, Date:3/24/2023 | | |
| Date: 3/24/2023. | | | | | |
| Printed name of authorized officer or employee: Casey Peck | | | | | |
| Title or position of authorized officer or employee: General Manager/CFO | | | | | |
| Telephone number of authorized officer or employee: 319-656-3668 | | | | | |
| Study Area Code of Reporting Carrier: | 351214 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/29/2023

Date: [3/29/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 PORTE CITY TEL. CO.](#)

Signature of authorized officer or employee: [Chris Hopp](#)

Digitally signed by Chris Hopp DN:cn=Chris Hopp, email=chopp@alpinecom.net, O=la porte city tel. co., l=Elkader IA 52043, Date:3/17/2023

Date: [3/17/2023](#).

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: | 351220 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/22/2023

Date: [3/22/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/24/2023

Date: [3/24/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/29/2023

Date: [3/29/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|---|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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=jheckman@ogdentc.com,O=ogden tel. co.-ia,I=Ogden IA 50212, Date:3/14/2023 | |
| Date: 3/14/2023 . | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4). | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: PALO COOPERATIVE TELEPHONE ASSOCIATION | | | | |
| Signature of authorized officer or employee: Erin Petersen | | | Digitally signed by Erin Petersen DN:cn=Erin Petersen,email=erin@palocommunications.net,O=palo cooperative telephone association,l=Palo IA 52324, Date:3/21/2023 | |
| Date: 3/21/2023 . | | | | |
| Printed name of authorized officer or employee: Erin Petersen | | | | |
| Title or position of authorized officer or employee: CEO/General Manager | | | | |
| Telephone number of authorized officer or employee: 319-851-3431 | | | | |
| Study Area Code of Reporting Carrier: | 351269 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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, Panora IA 50216, Date:3/23/2023 | |
| Date: 3/23/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: PRAIRIEBURG TEL. CO., INC. | | | | |
| Signature of authorized officer or employee: Misti Lindner | | | Digitally signed by Misti Lindner DN:cn=Misti Lindner,email=misti.lindner@hillcom.net,O=prairieburg tel. co.,inc.,l=Lawton OK 73507, Date:3/24/2023 | |
| Date: 3/24/2023 . | | | | |
| Printed name of authorized officer or employee: Misti Lindner | | | | |
| Title or position of authorized officer or employee: Regulatory Compliance Manager | | | | |
| Telephone number of authorized officer or employee: 580-529-5000 | | | | |
| Study Area Code of Reporting Carrier: | 351275 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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=mary@prestontelephone.com,O=preston tel. co.,l=Preston IA 52069-0167, Date:3/17/2023 | |
| Date: 3/17/2023. | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/16/2023 | |
| Date: 3/16/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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., I=Royal IA 51357, Date:3/18/2023 | |
| Date: 3/18/2023. | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: SHARON TEL. CO. | | | | | |
| Signature of authorized officer or employee: Scott A Havel | | | Digitally signed by Scott A Havel DN:cn=Scott A Havel,email=sharontc@sharontc.net,O=sharon tel. co.,l=Hills IA 52235, Date:3/15/2023 | | |
| Date: 3/15/2023 . | | | | | |
| Printed name of authorized officer or employee: Scott A Havel | | | | | |
| Title or position of authorized officer or employee: General manager | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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. \(SWT\)](#)

Signature of authorized officer or employee: [Melanie Johanns](#)

Digitally signed by Melanie Johanns DN:cn=Melanie Johanns,email=mjohanns@omnitel.biz,O=fmtc-i35, inc. (swt),l=Nora Springs IA 50458-0518, Date:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Melanie Johanns](#)

Title or position of authorized officer or employee: [Director of Accounting](#)

Telephone number of authorized officer or employee: [641-749-2531](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351301 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Kim Snitker](#)

Digitally signed by Kim Snitker DN:cn=Kim Snitker, email=springvl@netins.net, O=springville coop. tel. assn., l=Springville IA 52336-0009, Date:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Kim Snitker](#)

Title or position of authorized officer or employee: [Treasurer/ Executive 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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [STRATFORD MUTUAL TEL. CO.](#)

Signature of authorized officer or employee: [Jen Frank](#)

Digitally signed by Jen Frank DN:cn=Jen Frank,email=jfrank@stratfordtelephone.com,O=stratford mutual tel. co.,l=Stratford IA 50249, Date:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Jen Frank](#)

Title or position of authorized officer or employee: [Assistant Secretary/Office Manager](#)

Telephone number of authorized officer or employee: [515-838-2390](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351305 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 FARMERS TEL. CO.](#)

Signature of authorized officer or employee: [Roxanne White](#)

Digitally signed by Roxanne White DN:cn=Roxanne White,email=rwhite@evertek.net,O=united farmers tel. co.,l=Everly IA 51338, Date:3/23/2023

Date: [3/23/2023](#).

Printed name of authorized officer or employee: [Roxanne White](#)

Title or position of authorized officer or employee: [Executive Vice President](#)

Telephone number of authorized officer or employee: [712-834-2211](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351316 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=vanhorne@netins.net,O=van horne coop. tel. co.,l=Van Horne IA 52346-0096, Date:3/22/2023

Date: [3/22/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351320 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [VENTURA TEL. CO., INC.](#)

Signature of authorized officer or employee: [Thomas Lovell](#)

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:3/22/2023

Date: [3/22/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 351322 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [WELLMAN COOP. TEL. ASSN.](#)

Signature of authorized officer or employee: **Dion S. Schminke**

Digitally signed by Dion S. Schminke DN:cn=Dion S. Schminke, email=dion.s@wellmantelephone.com, O=wellman coop. tel. assn., l=Wellman IA 52356, Date:3/15/2023

Date: **3/15/2023.**

Printed name of authorized officer or employee: **Dion S. Schminke**

Title or position of authorized officer or employee: **General Manager, COO**

Telephone number of authorized officer or employee: **319-646-6075**

| | | | | | |
|---------------------------------------|---------------|--|--|-------------------|--|
| Study Area Code of Reporting Carrier: | 351329 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: WEST LIBERTY TEL. CO. | | | | | |
| Signature of authorized officer or employee: Justin Stinson | | | Digitally signed by Justin Stinson DN:cn=Justin Stinson,email=stinson@corp.L.com.net,O=west liberty tel. co.,l=West Liberty IA 52776, Date:3/23/2023 | | |
| Date: 3/23/2023. | | | | | |
| Printed name of authorized officer or employee: Justin Stinson | | | | | |
| Title or position of authorized officer or employee: General Manager | | | | | |
| Telephone number of authorized officer or employee: 319-627-0218 | | | | | |
| Study Area Code of Reporting Carrier: | 351332 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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. ASSN.-MN](#)

Signature of authorized officer or employee: [Cynthia Sweet](#)

Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace tel. assn.-mn,l=Houston MN 55943-0360, Date:3/20/2023

Date: [3/20/2023](#).

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:

[361346](#)

Filing Due Date for this form (mm/dd/yyyy)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 BARNESVILLE TEL. CO.](#)

Signature of authorized officer or employee: [Guy Swenson](#)

Digitally signed by Guy Swenson DN:cn=Guy Swenson,email=tecmanager@barnesvillemn.com,O=city of barnesville tel. co.,l=Barnesville MN 56514, Date:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Guy Swenson](#)

Title or position of authorized officer or employee: [TEC Manager](#)

Telephone number of authorized officer or employee: [218-354-2292](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 361353 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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: Greg Springer | | | Digitally signed by Greg Springer DN:cn=Greg Springer,email=greg@goc.tc.com,O=consolidated tel. co.-mn,l=Brainerd MN 56401, Date:3/23/2023 | |
| Date: 3/23/2023 . | | | | |
| Printed name of authorized officer or employee: Greg Springer | | | | |
| Title or position of authorized officer or employee: Chief Financial Officer | | | | |
| Telephone number of authorized officer or employee: 218-454-1128 | | | | |
| Study Area Code of Reporting Carrier: | 361373 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: EMILY COOP. TEL. CO. | | | | |
| Signature of authorized officer or employee: Josh Netland | | | Digitally signed by Josh Netland DN:cn=Josh Netland,email=jnetland@emily.net,O=emily coop. tel. co.,l=Emily MN 56447, Date:3/21/2023 | |
| Date: 3/21/2023 . | | | | |
| 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: | 361387 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=curtiskawlewski@nuvera.net,O=scott rice telephone company,l=New Ulm MN 56073, Date:3/15/2023

Date: [3/15/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 **Scott Rice Telephone Company**

Signature of authorized officer or employee *Nancy Blankenhagen* Date **10/04/2023**

Printed name of authorized officer or employee **Nancy Blankenhagen**

Title or position of authorized officer or employee **Controller**

Telephone number of authorized officer or employee: (507) 233 - 4252 ext.

| | | | |
|--------------------------------------|---------------|--|--------------|
| Study Area Code of Reporting Carrier | 361479 | Filing Due Date for this form (mm/dd/yyyy) | October 2023 |
|--------------------------------------|---------------|--|--------------|

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 | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/24/2023 | | |
| Date: 3/24/2023. | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [THREE RIVER TELCO](#)

Signature of authorized officer or employee: [Steven Dorf](#)

Digitally signed by Steven Dorf DN:cn=Steven Dorf,email=sdorf@threerivertelco.com,O=three river telco,l=Lynch NE 68746-0066, Date:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Steven Dorf](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [402-569-2666](#)

Study Area Code of Reporting Carrier:

[371525](#)

Filing Due Date for this form (mm/dd/yyyy)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/28/2023

Date: [3/28/2023](#).

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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/16/2023

Date: [3/16/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4). | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: DILLER TELEPHONE COMPANY | | | | |
| Signature of authorized officer or employee: Loren Duerksen | | | Digitally signed by Loren Duerksen DN:cn=Loren Duerksen,email=lorend@diodecom.net,O=diller telephone company,l=Diller NE 68343, Date:3/15/2023 | |
| Date: 3/15/2023 . | | | | |
| Printed name of authorized officer or employee: Loren Duerksen | | | | |
| Title or position of authorized officer or employee: General Manager/Director of Operations | | | | |
| Telephone number of authorized officer or employee: 402-793-5330 | | | | |
| Study Area Code of Reporting Carrier: | 371540 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/22/2023

Date: [3/22/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/19/2023 | |
| Date: 3/19/2023 . | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Jenna Burrell](#)

Digitally signed by Jenna Burrell DN:cn=Jenna Burrell,email=jenna@bwtelcom.net,O=hartman telephone exchanges inc.,l=Benkelman NE 69021, Date:3/17/2023

Date: [3/17/2023](#).

Printed name of authorized officer or employee: [Jenna Burrell](#)

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: HEMINGFORD COOP. TELEPHONE COMPANY | | | | |
| Signature of authorized officer or employee: Tonya Mayer | | | Digitally signed by Tonya Mayer DN:cn=Tonya Mayer,email=tonya@bbc.net,O=hemingford coop. telephone company,l=Hemingford NE 69348-0246, Date:3/21/2023 | |
| Date: 3/21/2023 . | | | | |
| Printed name of authorized officer or employee: Tonya Mayer | | | | |
| Title or position of authorized officer or employee: General Manager | | | | |
| Telephone number of authorized officer or employee: 308-487-3311 | | | | |
| Study Area Code of Reporting Carrier: | 371558 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Jeremiah Duerksen](#)

Digitally signed by Jeremiah Duerksen DN:cn=Jeremiah Duerksen,email=jeremiah@mainstaycomm.com,O=henderson co-op telephone company,l=Henderson NE 681371, Date:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Jeremiah Duerksen](#)

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023

Date: [3/21/2023](#).

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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/22/2023

Date: [3/22/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=gdummer@plvwtelco.net,O=plainview telephone company inc.,l=Plainview NE 68769-0117, Date:3/14/2023

Date: [3/14/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/14/2023

Date: [3/14/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 371591 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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., I=Stanton NE 68779, Date:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Nicholas Kelly Paden](#)

Title or position of authorized officer or employee: [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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: WAUNETA TEL. CO. | | | | |
| Signature of authorized officer or employee: Jenna Burrell | | | Digitally signed by Jenna Burrell DN:cn=Jenna Burrell,email=jenna@bwtelcom.net,O=wauneta tel. co.,l=Benkelman NE 69021, Date:3/17/2023 | |
| Date: 3/17/2023. | | | | |
| Printed name of authorized officer or employee: Jenna Burrell | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BENKELMAN TELEPHONE COMPANY INC.](#)

Signature of authorized officer or employee: [Jenna Burrell](#)

Digitally signed by Jenna Burrell DN:cn=Jenna Burrell,email=jenna@bwtelcom.net,O=benkelman telephone company inc.,l=Benkelman NE 69021, Date:3/17/2023

Date: [3/17/2023](#).

Printed name of authorized officer or employee: [Jenna Burrell](#)

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: | 372455 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: CONSOLIDATED TELCOM | | | | |
| Signature of authorized officer or employee: Sarah Haich | | | Digitally signed by Sarah Haich DN:cn=Sarah Haich,email=sarah@consolidatednd.com,O=consolidated telcom,I=Dickinson ND 58601, Date:3/15/2023 | |
| Date: 3/15/2023 . | | | | |
| Printed name of authorized officer or employee: Sarah Haich | | | | |
| Title or position of authorized officer or employee: Director of Finance and Accounting | | | | |
| Telephone number of authorized officer or employee: 701-456-5220 | | | | |
| Study Area Code of Reporting Carrier: | 381607 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Shane Hart](#)

Digitally signed by Shane Hart DN:cn=Shane Hart,email=shaneh@rtc.email,O=midstate telephone company,l=Parshall ND 58770-0068, Date:3/24/2023

Date: [3/24/2023](#).

Printed name of authorized officer or employee: [Shane Hart](#)

Title or position of authorized officer or employee: [CEO/ General Manager](#)

Telephone number of authorized officer or employee: [701-862-3115](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 381617 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [RESERVATION TELEPHONE COOPERATIVE](#)

Signature of authorized officer or employee: [Shane Hart](#)

Digitally signed by Shane Hart DN:cn=Shane Hart,email=shaneh@rtc.email,O=reservation telephone cooperative,l=Parshall ND 58770-0068, Date:3/24/2023

Date: [3/24/2023](#).

Printed name of authorized officer or employee: [Shane Hart](#)

Title or position of authorized officer or employee: [CEO/ General Manager](#)

Telephone number of authorized officer or employee: [701-862-3115](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 381632 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

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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 | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023 | | |
| Date: 3/21/2023 . | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Shane Hart](#)

Digitally signed by Shane Hart DN:cn=Shane Hart,email=shaneh@rtc.email,O=midstate communications inc.,l=Parshall ND 58770-0068, Date:3/24/2023

Date: [3/24/2023](#).

Printed name of authorized officer or employee: [Shane Hart](#)

Title or position of authorized officer or employee: [CEO/ General Manager](#)

Telephone number of authorized officer or employee: [701-862-3115](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 381638 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: SRT COMMUNICATIONS, INC. | | | | |
| Signature of authorized officer or employee: Jesse Kettelman | | | Digitally signed by Jesse Kettelman DN:cn=Jesse Kettelman,email=jessefk@srstel.com,O=srt communications, inc.,l=Minot ND 58702-2027, Date:3/21/2023 | |
| Date: 3/21/2023 . | | | | |
| Printed name of authorized officer or employee: Jesse Kettelman | | | | |
| Title or position of authorized officer or employee: Regulatory Manager | | | | |
| Telephone number of authorized officer or employee: 701-838-9750 | | | | |
| Study Area Code of Reporting Carrier: | 383303 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

**FCC Form 508
Connect America Fund Broadband Loop Support
Mechanism
Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|---------------|--|--|---------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent National Exchange Carrier Association, Inc. | | | | |
| Name of Reporting Carrier CHEYENNE RIVER SIOUX TRIBE TELEPHONE AUTHORITY | | | | |
| Signature of authorized officer or employee <i>Mona L. Thompson</i> | | | | Date <i>3/16/23</i> |
| Printed name of authorized officer or employee Mona L. Thompson | | | | |
| Title or position of authorized officer or employee General Manager | | | | |
| Telephone number of authorized officer or employee: (605) 964 - 2600 , ext. | | | | |
| Study Area Code of Reporting Carrier | 391647 | | Filing Due Date for this form (mm/dd/yyyy) | 3/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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: Tony Harris | | | Digitally signed by Tony Harris DN:cn=Tony Harris,email=tharris@beresfordtel.com,O=beresford municipal tel. co.,l=Beresford SD 57004, Date:3/15/2023 | | |
| Date: 3/15/2023. | | | | | |
| Printed name of authorized officer or employee: Tony Harris | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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@swifitel-bmu.com,O=city of brookings municipal tel. dept.,l=Brookings SD 57006, Date:3/21/2023 | | |
| Date: 3/21/2023 . | | | | | |
| Printed name of authorized officer or employee: Laura Julius | | | | | |
| Title or position of authorized officer or employee: Financial & IT 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=faith@faithsd.com,O=city of faith municipal tel co,I=Faith SD 57626-0368, Date:3/15/2023

Date: [3/15/2023](#).

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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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: Nicole Kroll | | | Digitally signed by Nicole Kroll DN:cn=Nicole Kroll,email=nicole.kroll@longlines.biz,O=jefferson telephone company - sd,l=Sergeant Bluffs IA 51054, Date:3/22/2023 | | |
| Date: 3/22/2023 . | | | | | |
| Printed name of authorized officer or employee: Nicole Kroll | | | | | |
| Title or position of authorized officer or employee: Accounting Manager | | | | | |
| Telephone number of authorized officer or employee: 712-271-5576 | | | | | |
| Study Area Code of Reporting Carrier: | 391666 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: KENNEBEC TELEPHONE COMPANY | | | | | |
| Signature of authorized officer or employee: Matt Collins | | | Digitally signed by Matt Collins DN:cn=Matt Collins,email=mattc@kennebectelephone.com,O=kennebec telephone company,l=Kennebec SD 57544, Date:3/16/2023 | | |
| Date: 3/16/2023 . | | | | | |
| Printed name of authorized officer or employee: Matt Collins | | | | | |
| Title or position of authorized officer or employee: President/Manager | | | | | |
| Telephone number of authorized officer or employee: 605-869-2220 | | | | | |
| Study Area Code of Reporting Carrier: | 391668 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|-----------------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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 | | | | Date: 3/21/2023 . | |
| <small>Digitally signed by Troy Schilling DN:cn=Troy Schilling,email=troys@wrvc.com,O=west river telecommunications coop.(mobridge),l=Hazen ND 58545, Date:3/21/2023</small> | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|---|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: RC TECHNOLOGIES | | | | | |
| Signature of authorized officer or employee: Robin Thoreson | | | | Digitally signed by Robin Thoreson DN:cn=Robin Thoreson,email=rthoreson@rtechteam.com,O=rc technologies,l=New Effington SD 57255-0197, Date:3/27/2023 | |
| Date: 3/27/2023 . | | | | | |
| Printed name of authorized officer or employee: Robin Thoreson | | | | | |
| Title or position of authorized officer or employee: Accounting Manager | | | | | |
| Telephone number of authorized officer or employee: 605-637-5211 | | | | | |
| Study Area Code of Reporting Carrier: | 391674 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/14/2023 | |
| Date: 3/14/2023 . | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/14/2023

Date: [3/14/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 ARKANSAS TEL. COOP INC.](#)

Signature of authorized officer or employee: [Larry D Frazier](#)

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:3/29/2023

Date: [3/29/2023](#).

Printed name of authorized officer or employee: [Larry D Frazier](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [501-865-7008](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 401697 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=wendyo@rallynet.us,O=cleveland cty tel. co.,l=Oregon MO 64473, Date:3/21/2023

Date: [3/21/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=wendyo@rallynet.us,O=decaturn telephone co inc-arkansas,I=Oregon MO 64473, Date:3/21/2023

Date: [3/21/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LAVACA TELEPHONE-AR](#)

Signature of authorized officer or employee: [Trent LeForce](#)

Digitally signed by Trent LeForce DN:cn=Trent LeForce, email=tleforce@dobson.net, O=lavaca telephone-ar, l=Oklahoma City OK 73134, Date:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Trent LeForce](#)

Title or position of authorized officer or employee: [CFO](#)

Telephone number of authorized officer or employee: [405-242-0336](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 401704 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/29/2023

Date: [3/29/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [NORTHERN ARKANSAS TEL. CO.,INC.](#)

Signature of authorized officer or employee: [Steven Sanders, Jr.](#)

Digitally signed by Steven Sanders, Jr. DN:cn=Steven Sanders, Jr.,email=steven@natconet.com,O=northern arkansas tel. co.,inc.,l=Flippin AR 72634-0209, Date:3/22/2023

Date: [3/22/2023](#).

Printed name of authorized officer or employee: [Steven Sanders, Jr.](#)

Title or position of authorized officer or employee: [President](#)

Telephone number of authorized officer or employee: [870-453-9273](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 401713 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Rhonda Rouse](#)

Digitally signed by Rhonda Rouse DN:cn=Rhonda Rouse,email=rrouse@pgtc.com,O=prairie grove telephone company,l=Praire Grove AR 72753-1010, Date:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Rhonda Rouse](#)

Title or position of authorized officer or employee: [Accounting/ HR Manager](#)

Telephone number of authorized officer or employee: [479-846-7226](#)

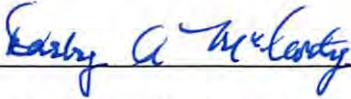
| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 401718 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support
Mechanism
Projected Annual Common Line Revenue Requirement Form

FCC Form 508
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | |
|--|--------|--|-----------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | |
| <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | |
| Name of Authorized Agent National Exchange Carrier Association, Inc. | | | |
| Name of Reporting Carrier Rice Belt Telephone Company Inc. | | | |
| Signature of authorized officer or employee  | | | Date 3/22/2023 |
| Printed name of authorized officer or employee Darby A. McCarty | | | |
| Title or position of authorized officer or employee President | | | |
| Telephone number of authorized officer or employee: (812) 876 - 2211 , ext. | | | |
| Study Area Code of Reporting Carrier | 401721 | Filing Due Date for this form (mm/dd/yyyy) | 3/31/2023 |
| <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: [Tina Moore](#)

Digitally signed by Tina Moore DN:cn=Tina Moore, email=tinam@swatco.com, O=southwest arkansas tel. coop. inc., l=Texarkana AR 71854-8073, Date:3/27/2023

Date: [3/27/2023](#).

Printed name of authorized officer or employee: [Tina Moore](#)

Title or position of authorized officer or employee: [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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/22/2023 | |
| Date: 3/22/2023 . | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/16/2023

Date: [3/16/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023 | |
| Date: 3/20/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 | Cunningham Telephone Co., Inc | | |
| Signature of authorized officer or employee |  | Date | 10/4/23 |
| Printed name of authorized officer or employee | Brent Cunningham | | |
| Title or position of authorized officer or employee | Vice President & General Manager | | |
| Telephone number of authorized officer or employee: | (785) 545-3215, ext. | | |
| Study Area Code of Reporting Carrier | 411761 | Filing Due Date for this form (mm/dd/yyyy) | October 2023 |

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: ELKHART TELEPHONE COMPANY INC. | | | | | |
| Signature of authorized officer or employee: Becky Scott | | | Digitally signed by Becky Scott DN:cn=Becky Scott,email=bscott@epictouch.com,O=elkhart telephone company inc.,l=Elkhart KS 67950, Date:3/20/2023 | | |
| Date: 3/20/2023 . | | | | | |
| Printed name of authorized officer or employee: Becky Scott | | | | | |
| Title or position of authorized officer or employee: President & CFO | | | | | |
| Telephone number of authorized officer or employee: 620-697-2111 | | | | | |
| Study Area Code of Reporting Carrier: | 411764 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|--|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023 | | |
| Date: 3/20/2023 . | | | | | |
| Printed name of authorized officer or employee: Tonya Murphy | | | | | |
| Title or position of authorized officer or employee: Secretary | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|--|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023 | | |
| Date: 3/15/2023 . | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/23/2023

Date: [3/23/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/17/2023 | |
| Date: 3/17/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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=mutual telephone company, l=Little River KS 67457, Date:3/20/2023 | |
| Date: 3/20/2023 . | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|--|------------------------|--|--|---|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4). | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: PEOPLES TELECOMMUNICATIONS, LLC | | | | | |
| Signature of authorized officer or employee: Jennifer Leach | | | | Digitally signed by Jennifer Leach DN:cn=Jennifer Leach,email=jennifer@peoplestelecom.net,O=peoples telecommunications, llc,l=La Cygne KS 66040, Date:3/21/2023 | |
| Date: 3/21/2023 . | | | | | |
| Printed name of authorized officer or employee: Jennifer Leach | | | | | |
| Title or position of authorized officer or employee: CEO/General Manager | | | | | |
| Telephone number of authorized officer or employee: 913-757-2500 | | | | | |
| Study Area Code of Reporting Carrier: | 411814 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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: Sarah Ledesma | | | Digitally signed by Sarah Ledesma DN:cn=Sarah Ledesma,email=sarah.ledesma@pioncomm.net,O=pioneer telephone association inc.,l=Ulysses KS 67880, Date:3/15/2023 | | |
| Date: 3/15/2023 . | | | | | |
| Printed name of authorized officer or employee: Sarah Ledesma | | | | | |
| Title or position of authorized officer or employee: Chief Financial Officer | | | | | |
| Telephone number of authorized officer or employee: 620-575-7229 | | | | | |
| Study Area Code of Reporting Carrier: | 411817 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CRAW-KAN TELEPHONE COOP INC- KS](#)

Signature of authorized officer or employee: [Craig Wilbert](#)

Digitally signed by Craig Wilbert DN:cn=Craig Wilbert,email=crwilbert@ckt.net,O=craw-kan telephone coop inc-ks,l=Girard KS 66743-0100, Date:3/17/2023

Date: [3/17/2023](#).

Printed name of authorized officer or employee: [Craig Wilbert](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [620-724-8235](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 411818 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/22/2023

Date: [3/22/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023](#).

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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=bill@sktc.net,O=southern kansas tel. co.,inc.,l=Clearwater KS 67026-0800, Date:3/22/2023

Date: [3/22/2023](#).

Printed name of authorized officer or employee: [William R. McVey](#)

Title or position of authorized officer or employee: [Chief Operations 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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/16/2023

Date: [3/16/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023 | |
| Date: 3/21/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 **UNITED TELEPHONE ASSOCIATION, INC.**

Signature of authorized officer or employee  Date **11/08/2023**

Printed name of authorized officer or employee **Todd Houseman**

Title or position of authorized officer or employee **General Manager/CEO**

Telephone number of authorized officer or employee: (620) 227 - 8641 , ext. 4250

| | | | |
|--------------------------------------|---------------|--|---------------|
| Study Area Code of Reporting Carrier | 411841 | Filing Due Date for this form (mm/dd/yyyy) | November 2023 |
|--------------------------------------|---------------|--|---------------|

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: [WHEAT STATE TELEPHONE, INC.](#)

Signature of authorized officer or employee: [Greg Reed](#)

Digitally signed by Greg Reed DN:cn=Greg Reed,email=greg.reed@wheatstate.com,O=wheat state telephone, inc.,l=Udall KS 67146, Date:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Greg Reed](#)

Title or position of authorized officer or employee: [President](#)

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023 | |
| Date: 3/21/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|--|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023 | | |
| Date: 3/21/2023 . | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: IAMO COMMUNICATIONS, INC.-MO | | | | | |
| Signature of authorized officer or employee: Tim Toepfer | | | Digitally signed by Tim Toepfer DN:cn=Tim Toepfer, email=tttoepfer@iamo.tel, O=i amo communications, inc.-mo, l=Coin IA 51636, Date:3/17/2023 | | |
| Date: 3/17/2023 . | | | | | |
| Printed name of authorized officer or employee: Tim Toepfer | | | | | |
| Title or position of authorized officer or employee: CEO & General Manage | | | | | |
| Telephone number of authorized officer or employee: 712-583-3232 | | | | | |
| Study Area Code of Reporting Carrier: | 421206 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Tommie Sue Loges](#)

Digitally signed by Tommie Sue Loges DN:cn=Tommie Sue Loges,email=t.loges@almacc.net,O=alma communications company dba alma tel. co.,l=Alma MO 64001, Date:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Tommie Sue Loges](#)

Title or position of authorized officer or employee: [Administrative Assistant](#)

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=wendyo@rallynet.us,O=ozark telephone company,l=Oregon MO 64473, Date:3/21/2023

Date: [3/21/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Carrie Jungwirth](#)

Digitally signed by Carrie Jungwirth DN:cn=Carrie Jungwirth,email=carriej@rallynet.us,O=farber telephone company,l=Mt. Vernon OR 97865, Date:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Carrie Jungwirth](#)

Title or position of authorized officer or employee: [Regulatory Accountant](#)

Telephone number of authorized officer or employee: [541-932-4411](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 421876 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GOODMAN TEL. CO.](#)

Signature of authorized officer or employee: [Wendy Ottman](#)

Digitally signed by Wendy Ottman DN:cn=Wendy Ottman, email=wendyo@rallynet.us, O=goodman tel. co., l=Oregon MO 64473, Date:3/21/2023

Date: [3/21/2023](#).

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: | 421886 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GRANBY TEL CO - MISSOURI](#)

Signature of authorized officer or employee: [Cheri M. Johnson](#)

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:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Cheri M. Johnson](#)

Title or position of authorized officer or employee: [Corporate Secretary](#)

Telephone number of authorized officer or employee: [417-472-5513](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 421887 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/15/2023

Date: [3/15/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=ross@southwestmo.com, O=mcdonald county telephone co., l=Pineville MO 64856-0207, Date:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/23/2023

Date: [3/23/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [NORTHEAST MISSOURI RURAL TEL. CO.](#)

Signature of authorized officer or employee: [Sarah Rouse](#)

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:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Sarah Rouse](#)

Title or position of authorized officer or employee: [CABS Coordinator](#)

Telephone number of authorized officer or employee: [660-874-4111](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 421931 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=wendyo@rallynet.us,O=seneca tel. co.,l=Oregon MO 64473, Date:3/21/2023

Date: [3/21/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4). | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: LAVACA TELEPHONE CO.- OK | | | | |
| Signature of authorized officer or employee: Trent LeForce | | | Digitally signed by Trent LeForce DN:cn=Trent LeForce, email=tleforce@dobson.net, O=lavaca telephone co.-ok, l=Oklahoma City OK 73134, Date:3/28/2023 | |
| Date: 3/28/2023 . | | | | |
| Printed name of authorized officer or employee: Trent LeForce | | | | |
| Title or position of authorized officer or employee: CFO | | | | |
| Telephone number of authorized officer or employee: 405-242-0336 | | | | |
| Study Area Code of Reporting Carrier: | 431704 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 - OK](#)

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 - ok,l=Caldwell KS 67022-0111, Date:3/23/2023

Date: [3/23/2023](#).

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: | 431788 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/15/2023 | | |
| Date: 3/15/2023 . | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/16/2023 | |
| Date: 3/16/2023. | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/17/2023

Date: [3/17/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/24/2023

Date: [3/24/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [GRAND TELEPHONE CO. INC.](#)

Signature of authorized officer or employee: [Jason Anderson](#)

Digitally signed by Jason Anderson DN:cn=Jason Anderson,email=jsanderson@grand.net,O=grand telephone co. inc.,l=Jay OK 74346-0308, Date:3/17/2023

Date: [3/17/2023](#).

Printed name of authorized officer or employee: [Jason Anderson](#)

Title or position of authorized officer or employee: [Controller/Co-Manager/1st Vice President](#)

Telephone number of authorized officer or employee: [918-253-4231](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 431994 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Misti Lindner](#)

Digitally signed by Misti Lindner DN:cn=Misti Lindner,email=misti.lindner@hillcom.net,O=medicine park telephone co.,l=Lawton OK 73507, Date:3/24/2023

Date: [3/24/2023](#).

Printed name of authorized officer or employee: [Misti Lindner](#)

Title or position of authorized officer or employee: [Regulatory Compliance Manager](#)

Telephone number of authorized officer or employee: [580-529-5000](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 432008 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=kelley.wells@ptci.net,O=panhandle telephone cooperative inc.,l=Guymon OK 73942, Date:3/27/2023

Date: [3/27/2023](#).

Printed name of authorized officer or employee: [Kelley Wells](#)

Title or position of authorized officer or employee: [Director of Regulatory Affairs](#)

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 TELEPHONE CO INC- OK](#)

Signature of authorized officer or employee: [Jane Merz](#)

Digitally signed by Jane Merz DN:cn=Jane Merz, email=jane@pinetelephone.com, O=pine telephone co inc-ok, l=Broken Bow OK 74728, Date:3/17/2023

Date: [3/17/2023](#).

Printed name of authorized officer or employee: [Jane Merz](#)

Title or position of authorized officer or employee: [Accounting Supervisor](#)

Telephone number of authorized officer or employee: [580-584-3100](#)

Study Area Code of Reporting Carrier:

[432017](#)

Filing Due Date for this form (mm/dd/yyyy)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/23/2023

Date: [3/23/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 432023 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 432029 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=keith@totahcomm.com, O=totah communications, inc., l=Ochelata OK 74051-0300, Date:3/22/2023

Date: [3/22/2023](#).

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: [918-535-3536](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 432030 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|--|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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=wendyo@rallynet.us,O=wyandotte telephone company,l=Oregon MO 64473, Date:3/21/2023 | | |
| Date: 3/21/2023 . | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 442038 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [BIG BEND TELEPHONE COMPANY INC.](#)

Signature of authorized officer or employee: [Lauren Sanders](#)

Digitally signed by Lauren Sanders DN:cn=Lauren Sanders,email=lauren.sanders@bbtco.com,O=big bend telephone company inc.,l=Alpine TX 79830, Date:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Lauren Sanders](#)

Title or position of authorized officer or employee: [Chief Financial Officer](#)

Telephone number of authorized officer or employee: [432-364-0054](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 442039 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Jason Tracy](#)

Digitally signed by Jason Tracy DN:cn=Jason Tracy,email=jasont@btel.com,O=brazoria tel. co.,l=Brazoria TX 77422, Date:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Jason Tracy](#)

Title or position of authorized officer or employee: [Controller](#)

Telephone number of authorized officer or employee: [979-798-2121](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 442040 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Clifford Humpert](#)

Digitally signed by Clifford Humpert DN:cn=Clifford Humpert,email=cliffhumpert@comcell.net,O=community telephone company, inc.,l=Windthorst TX 76389, Date:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Clifford Humpert](#)

Title or position of authorized officer or employee: [President/General Manager](#)

Telephone number of authorized officer or employee: [940-423-6201](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 442061 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: DELL TELEPHONE CO-OP. INC. - TX | | | | | |
| Signature of authorized officer or employee: J Ruben Martinez | | | Digitally signed by J Ruben Martinez DN:cn=J Ruben Martinez,email=Ruben@delltelco.com,O=dell telephone co-op. inc. - tx,l=Dell City TX 79837, Date:3/15/2023 | | |
| Date: 3/15/2023 . | | | | | |
| Printed name of authorized officer or employee: J Ruben Martinez | | | | | |
| Title or position of authorized officer or employee: Accounting Manager | | | | | |
| Telephone number of authorized officer or employee: 915-964-2352 | | | | | |
| Study Area Code of Reporting Carrier: | 442066 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023

Date: [3/21/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 442068 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|---|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: ELECTRA TELEPHONE COMPANY, INC. | | | | | |
| Signature of authorized officer or employee: Misti Lindner | | | | Digitally signed by Misti Lindner DN:cn=Misti Lindner,email=misti.lindner@hillcom.net,O=electra telephone company, inc.,l=Lawton OK 73507, Date:3/24/2023 | |
| Date: 3/24/2023 . | | | | | |
| Printed name of authorized officer or employee: Misti Lindner | | | | | |
| Title or position of authorized officer or employee: Regulatory Compliance Manager | | | | | |
| Telephone number of authorized officer or employee: 580-529-5000 | | | | | |
| Study Area Code of Reporting Carrier: | 442069 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Misti Lindner](#)

Digitally signed by Misti Lindner DN:cn=Misti Lindner,email=misti.lindner@hillcom.net,O=border to border communications,l=Lawton OK 73507, Date:3/24/2023

Date: [3/24/2023](#).

Printed name of authorized officer or employee: [Misti Lindner](#)

Title or position of authorized officer or employee: [Regulatory Compliance Manager](#)

Telephone number of authorized officer or employee: [580-529-5000](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 442073 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Bill Rakowitz](#)

Title or position of authorized officer or employee: [VP - Regulatory & Compliance](#)

Telephone number of authorized officer or employee: [361-771-3331](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 442076 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023 | |
| Date: 3/27/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/29/2023

Date: [3/29/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/23/2023

Date: [3/23/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/17/2023

Date: [3/17/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: LAKE LIVINGSTON TEL. CO. | | | | | |
| Signature of authorized officer or employee: William H Whitten | | | Digitally signed by William H Whitten DN:cn=William H Whitten,email=hubw@livingston.net,O=lake livingston tel. co.,l=Livingston TX 77351, Date:3/20/2023 | | |
| Date: 3/20/2023. | | | | | |
| Printed name of authorized officer or employee: William H Whitten | | | | | |
| Title or position of authorized officer or employee: General Manager | | | | | |
| Telephone number of authorized officer or employee: 936-566-4000 | | | | | |
| Study Area Code of Reporting Carrier: | 442104 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [LIPAN TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Beth Howard](#)

Digitally signed by Beth Howard DN:cn=Beth Howard,email=bethh@lipan.net,O=lipan telephone company,l=Lipan TX 76462, Date:3/16/2023

Date: [3/16/2023](#).

Printed name of authorized officer or employee: [Beth Howard](#)

Title or position of authorized officer or employee: [Sec / Treasurer](#)

Telephone number of authorized officer or employee: [254-646-2211](#)

Study Area Code of Reporting Carrier:

[442105](#)

Filing Due Date for this form (mm/dd/yyyy)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023

Date: [3/21/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|--|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: PEOPLES TELEPHONE COOPERATIVE - TX | | | | | |
| Signature of authorized officer or employee: Gena Von Reyn | | | | Digitally signed by Gena Von Reyn DN:cn=Gena Von Reyn,email=gena.vonreyn@gopeoples.net,O=peoples telephone cooperative - tx,lc= , Date:3/24/2023 | |
| Date: 3/24/2023 . | | | | | |
| Printed name of authorized officer or employee: Gena Von Reyn | | | | | |
| Title or position of authorized officer or employee: Director of Regulatory | | | | | |
| Telephone number of authorized officer or employee: 903-878-3172 | | | | | |
| Study Area Code of Reporting Carrier: | 442130 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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: Todd Wilson | | | Digitally signed by Todd Wilson DN:cn=Todd Wilson,email=todd@swtexas.com,O=southwest texas telephone company,lc= , Date:3/15/2023 | | |
| Date: 3/15/2023 . | | | | | |
| Printed name of authorized officer or employee: Todd Wilson | | | | | |
| Title or position of authorized officer or employee: Assistant General Manager | | | | | |
| Telephone number of authorized officer or employee: 830-683-1939 | | | | | |
| Study Area Code of Reporting Carrier: | 442135 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: TATUM TEL. CO. | | | | | |
| Signature of authorized officer or employee: Misti Lindner | | | Digitally signed by Misti Lindner DN:cn=Misti Lindner,email=misti.lindner@hillcom.net,O=tatum tel. co.,l=Lawton OK 73507, Date:3/24/2023 | | |
| Date: 3/24/2023. | | | | | |
| Printed name of authorized officer or employee: Misti Lindner | | | | | |
| Title or position of authorized officer or employee: Regulatory Compliance Manager | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Patrick McDonnell](#)

Digitally signed by Patrick McDonnell DN:cn=Patrick McDonnell,email=patrick.mcdonnell@vtx1.net,O=valley telephone co-op. inc. - tx,l=Raymondville TX 78580, Date:3/21/2023

Date: [3/21/2023](#).

Printed name of authorized officer or employee: [Patrick McDonnell](#)

Title or position of authorized officer or employee: [Chief Executive Officer](#)

Telephone number of authorized officer or employee: [956-642-1325](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 442159 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [SAN CARLOS APACHE TELECOMM. UTILITY, INC.](#)

Signature of authorized officer or employee: [Shirley Ortiz](#)

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:3/24/2023

Date: [3/24/2023](#).

Printed name of authorized officer or employee: [Shirley Ortiz](#)

Title or position of authorized officer or employee: [CEO/General Manager](#)

Telephone number of authorized officer or employee: [928-475-7058](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 452169 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Courtney Hogancamp](#)

Digitally signed by Courtney Hogancamp DN:cn=Courtney Hogancamp,email=chogancamp@gilarivertel.com,O=gila river telecommunications, inc.,l=Chandler AZ 85226, Date:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Courtney Hogancamp](#)

Title or position of authorized officer or employee: [Billing & Regulatory Reporting Manager](#)

Telephone number of authorized officer or employee: [520-796-8877](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 452179 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/29/2023

Date: [3/29/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/28/2023

Date: [3/28/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 452226 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [NUNN TEL. COMPANY](#)

Signature of authorized officer or employee: [Adam Rislov](#)

Digitally signed by Adam Rislov DN:cn=Adam Rislov,email=rislova@ezlink.com,O=nunn tel. company,l=Nunn CO 80648, Date:3/23/2023

Date: [3/23/2023](#).

Printed name of authorized officer or employee: [Adam Rislov](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [970-897-2200](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 462194 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Kyle Bradshaw](#)

Digitally signed by Kyle Bradshaw DN:cn=Kyle Bradshaw,email=kbradshaw@atccomm.com,O=albion tel. co. d/b/a atc communications,l=Albion ID 83311, Date:3/27/2023

Date: [3/27/2023](#).

Printed name of authorized officer or employee: [Kyle Bradshaw](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [208-673-2401](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 472213 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Sherry Maestas](#)

Digitally signed by Sherry Maestas DN:cn=Sherry Maestas,email=sherry.maestas@custertel.com,O=custer tel. cooperative inc.,l=Challis ID 83226, Date:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Sherry Maestas](#)

Title or position of authorized officer or employee: [Director of Finance](#)

Telephone number of authorized officer or employee: [208-879-4008](#)

Study Area Code of Reporting Carrier:

[472218](#)

Filing Due Date for this form (mm/dd/yyyy)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/27/2023 | |
| Date: 3/27/2023 . | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Ronald A Rembelski](#)

Digitally signed by Ronald A Rembelski DN:cn=Ronald A Rembelski, email=ron.r@fmtc.com, O=farmers mutual tel co ltd. - id, l=Fruitland ID 83619, Date:3/24/2023

Date: [3/24/2023](#).

Printed name of authorized officer or employee: [Ronald A Rembelski](#)

Title or position of authorized officer or employee: [General Manager](#)

Telephone number of authorized officer or employee: [208-452-2000](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 472221 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/28/2023

Date: [3/28/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Tim Roth](#)

Digitally signed by Tim Roth DN:cn=Tim Roth,email=troth@directcom.com,O=direct communications rockland, inc.,l=Rockland ID 83271, Date:3/28/2023

Date: [3/28/2023](#).

Printed name of authorized officer or employee: [Tim Roth](#)

Title or position of authorized officer or employee: [Analyst & Special Projects Manager](#)

Telephone number of authorized officer or employee: [208-945-8006](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 472232 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/27/2023 | |
| Date: 3/27/2023 . | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Keri Pike](#)

Digitally signed by Keri Pike DN:cn=Keri Pike,email=kpike@itstriangle.net,O=triangle tel. cooperative assn. inc.,l= , Date:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Keri Pike](#)

Title or position of authorized officer or employee: [Administrative Specialist](#)

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Keri Pike](#)

Digitally signed by Keri Pike DN:cn=Keri Pike,email=kpike@itstriangle.net,O=triangle telephone cooperative assn.,inc.-cmc,l= , Date:3/20/2023

Date: [3/20/2023](#).

Printed name of authorized officer or employee: [Keri Pike](#)

Title or position of authorized officer or employee: [Administrative Specialist](#)

Telephone number of authorized officer or employee: [406-394-7807](#)

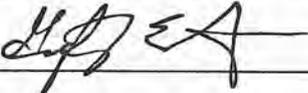
| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 483310 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support
Mechanism
Projected Annual Common Line Revenue Requirement Form

FCC Form 508
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | |
|---|---------------|--|---------------------|
| <p>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | |
| Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u> | | | |
| Name of Reporting Carrier <u>Mescalero Apache Telecom, Inc.</u> | | | |
| Signature of authorized officer or employee  | | | Date <u>3/24/23</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>3/31/2023</u> |
| <p>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | |

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 | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: DELL TELEPHONE CO-OP. INC.-NM | | | | | |
| Signature of authorized officer or employee: J Ruben Martinez | | | Digitally signed by J Ruben Martinez DN:cn=J Ruben Martinez,email=Ruben@delltelco.com,O=dell telephone co-op. inc.-nm,l=Dell City TX 79837, Date:3/15/2023 | | |
| Date: 3/15/2023 . | | | | | |
| Printed name of authorized officer or employee: J Ruben Martinez | | | | | |
| Title or position of authorized officer or employee: Accounting Manager | | | | | |
| Telephone number of authorized officer or employee: 915-964-2352 | | | | | |
| Study Area Code of Reporting Carrier: | 492066 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/20/2023

Date: [3/20/2023](#).

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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/29/2023

Date: [3/29/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/16/2023

Date: [3/16/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
Connect America Fund Broadband Loop Support
Mechanism
Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|--|---|--|--|-----------------------|
| <p>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent National Exchange Carrier Association, Inc. | | | | | |
| Name of Reporting Carrier Leaco Rural Telephone Cooperative, Inc. | | | | | |
| Signature of authorized officer or employee  | | | | | Date 3/21/2023 |
| Printed name of authorized officer or employee R. Mark Ellmer | | | | | |
| Title or position of authorized officer or employee CFO | | | | | |
| Telephone number of authorized officer or employee: (240) 556-1272 , ext. | | | | | |
| Study Area Code of Reporting Carrier 492264 | | Filing Due Date for this form (mm/dd/yyyy) 3/31/2023 | | | |
| <p>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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@tbc.net,O=tularosa basin telephone company, inc.,l=Tularosa NM 88352, Date:3/27/2023

Date: [3/27/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/17/2023

Date: [3/17/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/21/2023

Date: [3/21/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|--|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: Tim Roth | | | Digitally signed by Tim Roth DN:cn=Tim Roth,email=troth@directcom.com,O=direct communications cedar valley, llc,l=Rockland ID 83271, Date:3/28/2023 | |
| Date: 3/28/2023 . | | | | |
| Printed name of authorized officer or employee: Tim Roth | | | | |
| Title or position of authorized officer or employee: Analyst & Special Projects Manager | | | | |
| Telephone number of authorized officer or employee: 208-945-8006 | | | | |
| Study Area Code of Reporting Carrier: | 500758 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|---|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/24/2023 | |
| Date: 3/24/2023 . | | | | |
| 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) | 03/31/2023 |
| <p align="center">Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|--|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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, l=Manti UT 84642, Date:3/20/2023 | | |
| Date: 3/20/2023 . | | | | | |
| Printed name of authorized officer or employee: Tami Hansen | | | | | |
| Title or position of authorized officer or employee: Chief Financial Officer | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 UTAH TEL. ASSN. INC.](#)

Signature of authorized officer or employee: [Michael R East](#)

Digitally signed by Michael R East DN:cn=Michael R East,email=michaele@socen.com,O=south central utah tel. assn. inc.,l=Kanab UT 84741, Date:3/27/2023

Date: [3/27/2023](#).

Printed name of authorized officer or employee: [Michael R East](#)

Title or position of authorized officer or employee: [President/CEO](#)

Telephone number of authorized officer or employee: [435-826-4211](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 502286 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/14/2023

Date: [3/14/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: SKYLINE TELECOM COMPANY | | | | | |
| Signature of authorized officer or employee: Carrie Jungwirth | | | Digitally signed by Carrie Jungwirth DN:cn=Carrie Jungwirth,email=carriej@rallynet.us,O=skyline telecom company,l=Mt. Vernon OR 97865, Date:3/15/2023 | | |
| Date: 3/15/2023 . | | | | | |
| Printed name of authorized officer or employee: Carrie Jungwirth | | | | | |
| Title or position of authorized officer or employee: Regulatory Accountant | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|--|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: Brooke Ogg | | | Digitally signed by Brooke Ogg DN:cn=Brooke Ogg,email=brookeo@hoodcanal.net,O=hood canal telephone company,l=Union WA 98592, Date:3/27/2023 | | |
| Date: 3/27/2023 . | | | | | |
| Printed name of authorized officer or employee: Brooke Ogg | | | | | |
| Title or position of authorized officer or employee: Accounting Manager | | | | | |
| Telephone number of authorized officer or employee: 360-898-2760 | | | | | |
| Study Area Code of Reporting Carrier: | 522419 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

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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 | | | | |
| I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023 | |
| Date: 3/27/2023 . | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/27/2023 | | |
| Date: 3/27/2023. | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [ST. JOHN TELEPHONE, INC.](#)

Signature of authorized officer or employee: [Joseph A. Dennis](#)

Digitally signed by Joseph A. Dennis DN:cn=Joseph A. Dennis,email=joe@stjohncable.com,O=st. john telephone, inc.,l=Saint John WA 99171, Date:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Joseph A. Dennis](#)

Title or position of authorized officer or employee: [VP of Operations-Outside Plant](#)

Telephone number of authorized officer or employee: [509-648-3322](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 522442 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/24/2023

Date: [3/24/2023](#).

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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [WESTERN WAHAKIACUM COUNTY TEL COMPANY](#)

Signature of authorized officer or employee: [Carol Larson](#)

Digitally signed by Carol Larson DN:cn=Carol Larson,email=clarson@wwest.net,O=western wahkiakum county tel company,l=Rosburg WA 98643, Date:3/15/2023

Date: [3/15/2023](#).

Printed name of authorized officer or employee: [Carol Larson](#)

Title or position of authorized officer or employee: [Industry Relations Manager](#)

Telephone number of authorized officer or employee: [360-465-2211](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 522451 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 522452 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/28/2023

Date: [3/28/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: CANBY TELEPHONE ASSOCIATION | | | | | |
| Signature of authorized officer or employee: Paul Hauer | | | Digitally signed by Paul Hauer DN:cn=Paul Hauer,email=phauer@cbsoregon.com,O=canby telephone association,I=Mt. Angel OR 97362, Date:3/28/2023 | | |
| Date: 3/28/2023 . | | | | | |
| 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: 503-632-6314 | | | | | |
| Study Area Code of Reporting Carrier: | 532362 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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., l=Oregon City OR 97045, Date:3/27/2023

Date: [3/27/2023](#).

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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/25/2023

Date: [3/25/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| 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:3/21/2023 | |
| Date: 3/21/2023. | | | | |
| 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) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|--|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/15/2023 | |
| Date: 3/15/2023 . | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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,=Woodburn OR 97071, Date:3/25/2023

Date: [3/25/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent: [The National Exchange Carrier Association, Inc. \(NECA\)](#)

Name of Reporting Carrier: [CANBY TELEPHONE ASSOCIATION \(MT. ANGEL\)](#)

Signature of authorized officer or employee: [Paul Hauer](#)

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:3/28/2023

Date: [3/28/2023](#).

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: [503-632-6314](#)

| | | | | | |
|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 532386 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/28/2023

Date: [3/28/2023](#).

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)

[03/31/2023](#)

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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) | 03/31/2023 | |
|---------------------------------------|------------------------|--|--|----------------------------|--|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | |
|---|------------------------|--|--|----------------------------|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: PEOPLES TELEPHONE CO. - OR | | | | |
| Signature of authorized officer or employee: Erik Hoefer | | | Digitally signed by Erik Hoefer DN:cn=Erik Hoefer,email=ehofer@sctcweb.com,O=peoples telephone co. - or,l=Stayton OR 97383, Date:3/28/2023 | |
| Date: 3/28/2023 . | | | | |
| Printed name of authorized officer or employee: Erik Hoefer | | | | |
| Title or position of authorized officer or employee: President/CEO | | | | |
| Telephone number of authorized officer or employee: 503-769-4624 | | | | |
| Study Area Code of Reporting Carrier: | 532391 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|---|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| 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:3/17/2023 | | |
| Date: 3/17/2023 . | | | | | |
| 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) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

| | | | | | |
|---|------------------------|--|--|----------------------------|--|
| Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: STAYTON COOP. TEL CO | | | | | |
| Signature of authorized officer or employee: Erik Hoefler | | | Digitally signed by Erik Hoefler DN:cn=Erik Hoefler,email=ehoefler@sctcweb.com,O=stayton coop. tel co,l=Stayton OR 97383, Date:3/28/2023 | | |
| Date: 3/28/2023 . | | | | | |
| Printed name of authorized officer or employee: Erik Hoefler | | | | | |
| Title or position of authorized officer or employee: President/CEO | | | | | |
| Telephone number of authorized officer or employee: 503-769-4624 | | | | | |
| Study Area Code of Reporting Carrier: | 532399 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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,|e= , Date:3/23/2023

Date: [3/23/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 542301 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Jason Tikijian](#)

Digitally signed by Jason Tikijian DN:cn=Jason Tikijian,email=jtikijian@sebastiancorp.com,O=foresthill telephone company dba sebastian,l=Kerman CA 93630, Date:3/27/2023

Date: [3/27/2023](#).

Printed name of authorized officer or employee: [Jason Tikijian](#)

Title or position of authorized officer or employee: [Regulatory Manager](#)

Telephone number of authorized officer or employee: [559-846-4893](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 542318 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Jason Tikijian](#)

Digitally signed by Jason Tikijian DN:cn=Jason Tikijian,email=jtikijian@sebastiancorp.com,O=kerman telephone company dba sebastian,|=Kerman CA 93630, Date:3/27/2023

Date: [3/27/2023](#).

Printed name of authorized officer or employee: [Jason Tikijian](#)

Title or position of authorized officer or employee: [Regulatory Manager](#)

Telephone number of authorized officer or employee: [559-846-4893](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 542324 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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 PONDEROSA TELEPHONE COMPANY](#)

Signature of authorized officer or employee: [Greg Andreas](#)

Digitally signed by Greg Andreas DN:cn=Greg Andreas,email=grega@ponderosatel.com,O=the ponderosa telephone company,l=O'Neals CA 93645, Date:3/23/2023

Date: [3/23/2023](#).

Printed name of authorized officer or employee: [Greg Andreas](#)

Title or position of authorized officer or employee: [CFO](#)

Telephone number of authorized officer or employee: [559-868-6392](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 542332 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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: [Robert Griffin](#)

Digitally signed by Robert Griffin DN:cn=Robert Griffin,email=robertg@stcg.net,O=sierra telephone company, inc.,l= , Date:3/24/2023

Date: [3/24/2023](#).

Printed name of authorized officer or employee: [Robert Griffin](#)

Title or position of authorized officer or employee: [Vice President](#)

Telephone number of authorized officer or employee: [559-642-1178](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 542338 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

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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 | | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | | |
| Name of Reporting Carrier: THE SISKIYOU TELEPHONE CO. | | | | | |
| Signature of authorized officer or employee: Russell Elliott | | | Digitally signed by Russell Elliott DN:cn=Russell Elliott,email=r.elliott@siskiyoutelephone.com,O=the siskiyou telephone co.,l=Etna CA 96027, Date:3/15/2023 | | |
| Date: 3/15/2023 . | | | | | |
| Printed name of authorized officer or employee: Russell Elliott | | | | | |
| Title or position of authorized officer or employee: CEO | | | | | |
| Telephone number of authorized officer or employee: 530-467-6120 | | | | | |
| Study Area Code of Reporting Carrier: | 542339 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

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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 | | | | |
| <p>I certify that The National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p> | | | | |
| Name of Authorized Agent: The National Exchange Carrier Association, Inc. (NECA) | | | | |
| Name of Reporting Carrier: VOLCANO TELEPHONE COMPANY | | | | |
| Signature of authorized officer or employee: Brenda Shepard | | | Digitally signed by Brenda Shepard DN:cn=Brenda Shepard,email=brendas@volcanotel.com,O=volcano telephone company,l=Pine Grove CA 95665, Date:3/27/2023 Date: 3/27/2023 . | |
| Printed name of authorized officer or employee: Brenda Shepard | | | | |
| Title or position of authorized officer or employee: Chief Financial Officer | | | | |
| Telephone number of authorized officer or employee: 209-296-1447 | | | | |
| Study Area Code of Reporting Carrier: | 542343 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 552349 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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:3/27/2023

Date: [3/27/2023](#).

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](#)

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|---------------------------------------|------------------------|--|--|----------------------------|--|
| Study Area Code of Reporting Carrier: | 553304 | | Filing Due Date for this form (mm/dd/yyyy) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

FCC Form 508
Connect America Fund Broadband Loop Support
Mechanism
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier

I certify that National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent **National Exchange Carrier Association, Inc.**

Name of Reporting Carrier **Sandwich Isles Communications, Inc.**

Signature of authorized officer or employee  Date **3/20/23**

Printed name of authorized officer or employee **Breanne Kahalewai**

Title or position of authorized officer or employee **President**

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) | 3/31/2023 |
|--------------------------------------|--------|--|-----------|

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

**FCC Form 508
 Connect America Fund Broadband Loop Support Mechanism
 Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism
 Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that [The National Exchange Carrier Association, Inc. \(NECA\)](#) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 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, LLC](#)

Signature of authorized officer or employee: [Joe Shinohara](#)

Digitally signed by Joe Shinohara DN:cn=Joe Shinohara, email=jshinohara@gta.net, O=teleguam holdings, llc, l=Tamuning GU 96913, Date:3/20/2023

Date: [3/20/2023](#).

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) | 03/31/2023 | |
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Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.