ATC Communications

p 208-673-5335 / f 208-673-6200 / e atc@atcnet.net / a 225 W. North St. Albion, ID 83311

RECEIVED
2014 JUL -1 PM 3:25
IDAHO PUBLIC UTILITIES COMMISSION

Ms. Jean Jewell
Commission Secretary
Idaho Public Utilities Commission
472 West Washington Street
Boise, Idaho 83720
jean.jewell@puc.idaho.gov

GNR-T-14-01

RE: 2013 Eligible Telecommunications Carrier (ETC) Annual Reporting Requirements with the IPUC

Dear Ms. Jewell:

Albion Telephone Company, Inc. ("the Company") hereby provides copies to the Idaho Public Utilities Commission ("Commission") of the filing to the Federal Communications Commission ("FCC") and the Universal Service Administrative Corporation ("USAC") for designation as an Eligible Telecommunications Carrier, in accordance with 47 U.S.C. 54.313 and 54.422. I have also included the signed Affidavit pursuant to Commission Order 29841. Company, Study Area Code 472213, is a rural incumbent local exchange carrier (ILEC) as designated by the FCC, and is eligible to receive federal universal service high-cost support pursuant to the Code of Federal Regulations ("CFR"), Title 47, Sections 54.301, 54.305, and Part 36, sub-part F.

Please review the attached filing and include Company in your Annual Use Certification Letter to USAC and the FCC.

Please note the enclosed document contains confidential trade secret information that is exempt from public disclosure pursuant to Section 9-340D(1), Idaho Code. Pursuant to Rule 67 of the Rules of Procedure of the Idaho Public Utilities Commission, the enclosed trade secret information has been submitted on yellow paper and has been separated from the non-confidential portion of the document.

If you have any questions, do not hesitate to contact me directly.

Sincerely,

Rich Redman
Vice President

Enclosure
CC: Aaron Sedler

State of Idaho) CERTIFICATION BY ELIGIBLE TELECOMMUNICATIONS CARRIER
) ss OF COMPLIANCE WITH SERVICE QUALITY AND CUSTOMER
County of Cassia) PROTECTION, ABILITY TO REMAIN FUNCTIONAL IN EMERGENCIES,
AND USE OF FEDERAL HIGH-COST SUPPORT.

AFFIDAVIT OF BUSINESS OR CORPORATE OFFICER

The Idaho Public Utilities Commission Order No. 29841requires that Eligible Telecommunications Carriers certify that it is compliant with applicable service quality standards and consumer protection rules; and ETCs must demonstrate the ability to remain functional in emergencies. In addition, the Commission must file an annual certification with the USAC and the FCC that all federal high-cost support provided to ETCs within the State of Idaho will be used only for the provision, maintenance, and upgrading of facilities and services for which the support is intended. Accordingly, the undersigned states and verifies under oath the following:

1. I am an officer of Albion Telephone Company, Inc, an eligible telecommunications carrier for receiving federal universal service support under section 214(e) of the Telecommunications Act of 1996 in the state of Idaho.

2. I am familiar with the Company's day-to-day operations in the state of Idaho and with the State's service quality standards and consumer protection rules as set forth in Commission Order No. 29841.

3. Albion Telephone Company, Inc. is complying with applicable service quality standards and consumer protection rules of the Federal Communications Commission and the Idaho Public Utilities Commission.

4. I certify to the Commission that the Company is able to remain functional in emergencies as set forth in Commission Order No. 29841 and in 47 C.F.R. § 54.201(a)(2).

5. I also certify that all federal universal service support funds received by Albion Telephone Company, Inc. during the current calendar year will be used in a manner consistent with section 254(e); that is, for the provision, maintenance, and upgrading of facilities and services for which the support is intended. The company will continue to comply for the period of January 1, 2015, through December 31, 2015, to be eligible for federal universal service fund support.

6. This verification and affidavit is provided to be the Idaho Public Utilities Commission to enable the IPUC to certify to the FCC that federal universal service support received by the eligible carriers in the state will be used in a manner consistent with Section 254(e) of the Telecommunications Act.

Vice President
Name/Title

6/25/2014
Date

SUBSCRIBED AND SWORN to before me this 25th day of June 2014

Nancy J. Wolf
Notary Public for Idaho, residing at Cassia County
My Commission expires 12/14/2015

Nancy J. Wolf
Notary Public
State of Idaho

FCC Form 481 - Carrier Annual Reporting Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name: Person USAC should contact with questions about this data	Julie Laumb
<035>	Contact Telephone Number: Number of the person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	jlaumb@atccomm.com

ANNUAL REPORTING FOR ALL CARRIERS		54.313 Completion Required	54.422 Completion Required
		(check box when complete)	
<100> Service Quality Improvement Reporting	*(complete attached worksheet)*	✔	
<200> Outage Reporting (voice)	*(complete attached worksheet)*	✔	✔
<210> ✔ <-- check box if no outages to report		✔	
<300> Unfulfilled Service Requests (voice) 0			
<310> Detail on Attempts (voice)	*(attach descriptive document)*		
<320> Unfulfilled Service Requests (broadband) 0		✔	
<330> Detail on Attempts (broadband)	*(attach descriptive document)*		
<400> Number of Complaints per 1,000 customers (voice)			
<410> Fixed 0.0		✔	✔
<420> Mobile 0.0			
<430> Number of Complaints per 1,000 customers (broadband)		✔	
<440> Fixed 0.0			
<450> Mobile 0.0			
<500> Service Quality Standards & Consumer Protection Rules Compliance	*(check to indicate certification)*	✔	✔
<510> 472213id510.pdf	*(attached descriptive document)*	✔	✔
<600> Functionality in Emergency Situations	*(check to indicate certification)*	✔	✔
<610> 472213id610.pdf	*(attached descriptive document)*	✔	✔
<700> Company Price Offerings (voice)	*(complete attached worksheet)*	✔	
<710> Company Price Offerings (broadband)	*(complete attached worksheet)*	✔	
<800> Operating Companies and Affiliates	*(complete attached worksheet)*	✔	✔
<900> Tribal Land Offerings (Y/N)? ○ ◉	*(if yes, complete attached worksheet)*	✔	
<1000> Voice Services Rate Comparability	*(check to indicate certification)*	✔	
<1010> 472213id1010.pdf	*(attach descriptive document)*	✔	
<1100> Terrestrial Backhaul (Y/N)? ◉ ○	*(if not, check to indicate certification)*	✔	
<1110>	*(complete attached worksheet)*	✔	
<1200> Terms and Condition for Lifeline Customers	*(complete attached worksheet)*		✔

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000>	*(check to indicate certification)*		
<2005>	*(complete attached worksheet)*		

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>	*(check to indicate certification)*	✔	
<3005>	*(complete attached worksheet)*	✔	

(100) Service Quality Improvement Reporting Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<110>	Has your company received its ETC certification from the FCC?	(yes / no) ○ ◉
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no) ○ ○

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

472213id112.pdf

Name of Attached Document

Please check these boxes below to confirm that the attached documents(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

<113>	Maps detailing progress towards meeting plan targets	☐
<114>	Report how much universal service (USF) support was received	☐
<115>	How (USF) was used to improve service quality	☐
<116>	How (USF)was used to improve service coverage	☐
<117>	How (USF) was used to improve service capacity	☐
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	☐

(200) Service Outage Reporting (Voice)
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<220>

<a> NORS Reference Number	<b1> Outage Start Date	<b2> Outage Start Time	<b3> Outage End Date	<b4> Outage End Time	<c1> Number of Customers Affected	<c2> Total Number of Customers	<d> 911 Facilities Affected (Yes / No)	<e> Service Outage Description (Check all that apply)	<f> Did This Outage Affect Multiple Study Areas (Yes / No)	<g> Service Outage Resolution	<h> Preventative Procedures

(700) Price Offerings including Voice Rate Data
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<701>	Residential Local Service Charge Effective Date	1/1/2014
<702>	Single State-wide Residential Local Service Charge	

<703>

<a1> State	<a2> Exchange (ILEC)	<a3> SAC (CETC)	<b1> Rate Type	<b2> Residential Local Service Rate	<b3> State Subscriber Line Charge	<b4> State Universal Service Fee	<b5> Mandatory Extended Area Service Charge	<c> Total per line Rates and Fees
				-- See attached worksheet --				

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<711>

<a1>	<a2>	<b1>	<b2>	<c>	<d1>	<d2>	<d3>	<d4>
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {*select*}
			-- See attached worksheet --					

(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<810>	Reporting Carrier	Albion Telephone Company, Inc.
<811>	Holding Company	
<812>	Operating Company	Albion Telephone Company, Inc.

<813>

<a1> Affiliates	<a2> SAC	<a3> Doing Business As Company or Brand Designation

(900) Tribal Lands Reporting Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

		Select (Yes,No, NA)
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	
<922>	Feasibility and sustainability planning;	
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	

(1100) No Terrestrial Backhaul Reporting Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G) ☐

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G) ☐

(1200) Terms and Condition for Lifeline Customers
Lifeline
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of Attached Document

<1220> Link to Public Website HTTP www.atcnet.net

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☑

<1222> Details on the number of minutes provided as part of the plan, ☑

<1223> Additional charges for toll calls, and rates for each such plan. ☑

(2000) Price Cap Carrier Additional Documentation
Data Collection Form
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

<2010> 2nd Year Certification {47 CFR § 54.313(b)(1)} ☐
<2011> 3rd Year Certification {47 CFR § 54.313(b)(2)} ☐

Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)}

<2012> 2013 Frozen Support Certification ☐
<2013> 2014 Frozen Support Certification ☐
<2014> 2015 Frozen Support Certification ☐
<2015> 2016 and future Frozen Support Certification ☐

Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}

<2016> Certification Support Used to Build Broadband ☐

Connect America Phase II Reporting {47 CFR § 54.313(e)}

<2017> 3rd year Broadband Service Certification ☐
<2018> 5th year Broadband Service Certification ☐
<2019> Interim Progress Certification ☐

<2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐

<2021> Interim Progress Community Anchor Institutions

Name of Attached Document Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3010) **Progress Report on 5 Year Plan**
Milestone Certification {47 CFR § 54.313(f)(1)(i)}

Name of Attached Document Listing Required Information

(3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐

(3012) Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}

Name of Attached Document Listing Required Information

(3013) Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)} (Yes/No) 8

(3014) If yes, does your company file the RUS annual report (Yes/No) 8

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) ☑

(3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☑

(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

472213id3017.pdf

Name of Attached Document Listing Required Information

(3018) If the response is no on line 3014, Is your company audited? (Yes/No) O

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains

(3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications ☐

(3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☐

(3021) Management letter issued by the independent certified public accountant that performed the company's financial audit. ☐

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

(3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers, ☐

(3023) Underlying information subjected to a review by an independent certified public accountant ☐

(3024) Underlying information subjected to an officer certification. ☐

(3025) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3026) Attach the worksheet listing required information

Name of Attached Document Listing Required Information

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: ALBION TEL CO-ATC

Signature of Authorized Officer: CERTIFIED ONLINE Date

Printed name of Authorized Officer: Rich Redman

Title or position of Authorized Officer: Vice President

Telephone number of Authorized Officer: 2086735335 ext.

Study Area Code of Reporting Carrier: 472213 Filing Due Date for this form: 07/01/2014

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

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
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<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

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

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier

I certify that (Name of Agent)_____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.

Name of Authorized Agent:

Name of Reporting Carrier:

Signature of Authorized Officer: Date:

Printed name of Authorized Officer:

Title or position of Authorized Officer:

Telephone number of Authorized Officer:

Study Area Code of Reporting Carrier: Filing Due Date for this form:

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

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier

I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.

Name of Reporting Carrier:

Name of Authorized Agent or Employee of Agent:

Signature of Authorized Agent or Employee of Agent: Date:

Printed name of Authorized Agent or Employee of Agent:

Title or position of Authorized Agent or Employee of Agent

Telephone number of Authorized Agent or Employee of Agent:

Study Area Code of Reporting Carrier: Filing Due Date for this form:

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

Item 510 VOICE/BROADBAND

Albion Telephone Company, Inc. understands and complies with the Idaho Public Utilities Commission's *Telephone Customer Relations Rules*, IDAPA 31.41.01, adopted under the general legal authority of the Public Utilities Law, Chapters 1 through 7, Title 61, Idaho Code, and the Telecommunications Act of 1988, Chapter 6, Title 62, Idaho Code, with regards to service. These telephone customer relations rules provide a set of fair, just, reasonable, and non-discriminatory rules regarding deposits, guarantees, billing, application for service, denial of service, termination of service, complaints to telephone companies, billing for interrupted service, and provisions of certain information about customer to authorities. We conduct an annual CPNI and Red Flag Training session that every employee must attend and certify to the training. We send out a pamphlet to all our customers annually that explain the Public Utilities Commission's Telephone Customer Relations Rules and at this same time all our of Customer Service Representative read and go over the pamphlet at a training session.

Item 610

Pursuant to 47 C.F.R. § 54.313(a)(6) and/or 47 C.F.R § 54.422(b)(4) as set forth in 47 C.F.R. § 54.202(a)(2) Albion Telephone Company (ATC) meets the requirements to remain functional in emergency situations and has the following capabilities: Back-up power is provided to ATC's central offices by use of fixed generator and batteries that provide it with 24 hours of emergency power service. In addition, ATC's field electronics have 8 hours of back-up power by use of fixed/mobile generators and batteries. ATC also has two separate networks, ETHERNET and SONET technology in its network that allows for self-healing network should an equipment failure occur in its core network and will automatically reroute traffic. ATC is capable of managing traffic spikes resulting from emergency situations.

(700) Price Offerings including Voice Rate Data
Data Collection Form

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OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

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<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<701>	Residential Local Service Charge Effective Date	1/1/2014
<702>	Single State-wide Residential Local Service Charge	

<703>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<b4>	<b5>	<c>
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fees
ID	ALBION		FR	25.76	0.0	0.16	0.0	25.92
ID	ALBION 1		MS	16.0	0.0	0.16	0.0	16.16
ID	ALBION 2		MS	14.0	0.0	0.16	0.0	14.16
ID	ALMO		FR	25.76	0.0	0.16	0.0	25.92
ID	ALMO 1		MS	16.0	0.0	0.16	0.0	16.16
ID	ALMO 2		MS	14.0	0.0	0.16	0.0	14.16
ID	ARCO		FR	25.76	0.0	0.16	0.0	25.92
ID	ARCO 1		MS	16.0	0.0	0.16	0.0	16.16
ID	ARCO 2		MS	14.0	0.0	0.16	0.0	14.16
ID	ELBA		FR	25.76	0.0	0.16	0.0	25.92
ID	ELBA 1		MS	16.0	0.0	0.16	0.0	16.16
ID	ELBA 2		MS	14.0	0.0	0.16	0.0	14.16
ID	HOLBROOK		FR	25.76	0.0	0.16	0.0	25.92
ID	HOLBROOK 1		MS	16.0	0.0	0.16	0.0	16.16
ID	HOLBROOK 2		MS	14.0	0.0	0.16	0.0	14.16
ID	HOWE		FR	25.76	0.0	0.16	0.0	25.92
ID	HOWE 1		MS	16.0	0.0	0.16	0.0	16.16
ID	HOWE 2		MS	14.0	0.0	0.16	0.0	14.16
ID	MACKAY		FR	25.76	0.0	0.16	0.0	25.92
ID	MACKAY 1		MS	16.0	0.0	0.16	0.0	16.16
ID	MACKAY 2		MS	14.0	0.0	0.16	0.0	14.16

(700) Price Offerings including Voice Rate Data
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<701>	Residential Local Service Charge Effective Date	1/1/2014
<702>	Single State-wide Residential Local Service Charge	

<703>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<b4>	<b5>	<c>
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fees
ID	MALAD		FR	25.76	0.0	0.16	0.0	25.92
ID	MALAD 1		MS	16.0	0.0	0.16	0.0	16.16
ID	MALAD 2		MS	14.0	0.0	0.16	0.0	14.16
ID	MALTA		FR	25.76	0.0	0.16	0.0	25.92
ID	MALTA 1		MS	16.0	0.0	0.16	0.0	16.16
ID	MALTA 2		MS	14.0	0.0	0.16	0.0	14.16
ID	MOORE		FR	25.76	0.0	0.16	0.0	25.92
ID	MOORE 1		MS	16.0	0.0	0.16	0.0	16.16
ID	MOORE 2		MS	14.0	0.0	0.16	0.0	14.16
ID	RAFT RIVER		FR	25.76	0.0	0.16	0.0	25.92
ID	RAFT RIVER 1		MS	16.0	0.0	0.16	0.0	16.16
ID	RAFT RIVER 2		MS	14.0	0.0	0.16	0.0	14.16
ID	YOST		FR	25.76	0.0	0.16	0.0	25.92
ID	YOST 1		MS	16.0	0.0	0.16	0.0	16.16
ID	YOST 2		MS	14.0	0.0	0.16	0.0	14.16

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472213
<015>	Study Area Name	ALBION TEL CO-ATC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086735335 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<711>

<a1> State	<a2> Exchange (ILEC)	<b1> Residential Rate	<b2> State Regulated Fees	<c> Total Rates and Fees	<d1> Broadband Service - Download Speed (Mbps)	<d2> Broadband Service -Upload Speed (Mbps)	<d3> Usage Allowance (GB)	<d4> Usage Allowance Action Taken When Limit Reached {select}
ID	ALL	34.95	0.0	34.95	3.0	1.0	0.0	Other, Unlimited-No Action
ID	ALL	44.95	0.0	44.95	6.0	1.0	0.0	Other, Unlimited-No Action
ID	ALL	59.95	0.0	59.95	10.0	3.0	0.0	Other, Unlimited-No Action
ID	ALL	74.95	0.0	74.95	15.0	3.0	0.0	Other, Unlimited-No Action
ID	ALL	99.95	0.0	99.95	20.0	3.0	0.0	Other, Unlimited-No Action
ID	ALL	149.95	0.0	149.95	30.0	25.0	0.0	Other, Unlimited-No Action
ID	ALL	199.95	0.0	199.95	50.0	25.0	0.0	Other, Unlimited-No Action
ID	ALL	25.95	0.0	25.95	3.0	1.0	0.0	Other, Unlimited-No Action
ID	ALL	35.95	0.0	35.95	6.0	1.0	0.0	Other, Unlimited-No Action
ID	ALL	50.95	0.0	50.95	10.0	3.0	0.0	Other, Unlimited-No Action

Response to Line 1000
Albion Telephone Company, Inc.
472213

Voice Services Comparability Report

Pursuant to 47 C.F.R. § 54.313 (a) (10) Albion Telephone Company, Inc. ("ATC") is in compliance with the requirement that voice services is no more than two standard deviations above the national average urban rate for voice service of $46.96 as specified in Public Notice DA 14-384 issued on March 20, 2014. ATC's current total local end-user rate[1] of $25.76 (which includes a local fee of $25.76 and a mandated state fees of $.16) it is not above the standard deviation as specified in the USF/ICC Transformation Order. [2]

[1] Local End User Rate as defined in USF/ICC Transformation Order 26 FCC Rcd at 17751, Para. 238

[2] USF/ICC Transformation Order, 26 FCC Rcd at 17694, Para. 84 (footnote included) "The standard deviation is a measure of dispersion. The sample standard deviation is the square root of the sample variance. The sample variance is calculated as the sum of the squared deviations of the individual observations in the sample of data from the sample average divided by the total number of observations in the sample minus one. In a normal distribution, about 68 percent of the observations lie within one standard deviation above and below the average and about 95 percent of the observations lie within two standard deviations above and below the average."