FCC For	rm 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	522447	
<015>	Study Area Name	TOLEDO TELEPHONE CO	
<020>	Program Year	2017	
<030>	Contact Name: Person USAC should contact with questions about this data	Dale Merten	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	3608642044 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	dale@toledotel.com	
	Form Type	54.313	

	ervice Quality Improvement Reporting Ollection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	522447	
<015>	Study Area Name	TOLEDO TELEPHONE C	co
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3608642044 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com	com
<110>	Has your company received its ETC certification from the FCC? If your answer to Line <110> is yes, do you have an existing §54.202(a) "5	(yes / no)	
<111>	year plan" filed with the FCC?	(yes / no)	o) • O
<112>	If your answer to Line <111> is yes, please 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. 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 CETC which only receives frozen support, your progress report is only required to address voice telephony service.		16 Five Year Plan Update.docx
	Please select the appropriate responses below (Yes, No, Not Applicable) to cont that the attached document(s), on line 112, contains a progress report on its fiv service quality improvement plan pursuant to §54.202(a). The information shall submitted at the wire center level or census block as appropriate.	ve-year	Name of Attached Document
<113>	Maps detailing progress towards meeting plan targets		No
<114>	Report how much universal service (USF) support was received		Yes
<115>	How much (USF) was used to improve service quality and how support was used to improve	rove service quality	Yes
<116>	How much (USF) was used to improve service coverage and how support was used to im	prove service coverage	e Yes
<117> <118>	How much (USF) was used to improve service capacity and how support was used to improve an explanation of network improvement targets not met in the prior calendar year.	prove service capacity	Yes Not Applicable

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

		July 2013										
<010>	Study Area Co	ode				522447						
<015>	Study Area Na	Study Area Name				TOLEDO TELE	PHONE CO					
<020>	Program Year				2017							
<030>	Contact Name	e - Person USAC	should contac	t regarding this	s data	Dale Merten	1					
<035>	Contact Telep	hone Number	- Number of pe	rson identified	in data line <0	30> 3608642044	ext.					
<039>	Contact Email	Address - Ema	il Address of pe	rson identified	l in data line <0	30> dale@toledo	otel.com					
<210>	For the prior calendar year, were there any reportable voice service outages? No											
		•	,	. ,								
<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d>></d>	<e></e>	<f></f>	<g></g>	<h>></h>
<220>	NORS Reference Number		•			ū		<d> 911 Facilities Affected (Yes / No)</d>	<e> Service Outage Description (Check all that apply)</e>	<f>Did This Outage Affect Multiple Study Areas (Yes / No)</f>	<g> Service Outage Resolution</g>	<h>></h>

•	fulfilled Service Request lection Form				FCC Form 481 OMB Control No. 3060-0986/OMB Control July 2013	ol No. 3060-0819
					July 2013	
<010>	Study Area Code	522447				
<015>	Study Area Name	TOLEDO TELEPHONE CO				
<020>	Program Year	2017				
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten				
<035> Contact Telephone Number - Number of person identified in data line <030>						
<039>	Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com				
<300> U	Infulfilled service request (voice)	0	•			
<310> [Detail on attempts (voice)					
	Na	me of Attached Document				
<320>	Unfulfilled service request (broadband)	0				
<330>	Detail on attempts (broadband)					<u>—</u>
		Name of Attached Document				

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	522447	
<015>	Study Area Name	TOLEDO TELEPHONE CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should conta	ct regarding this data	Merten
<035>	Contact Telephone Number - Number of p <030>	erson identified in data line	3608642044 ext.
<039>	Contact Email Address - Email Address of p <030>	person identified in data line	dale@toledotel.com
<400>	Select from the drop-down list to indicate voice complaints (zero or greater) for voice calendar year for each service area in which any facilities you own, operate, lease, or or	telephony service in the prior hyou are designated an ETC fo	
<410>	Complaints per 1000 customers for fixed v	oice	5.0E-4
<420>	Complaints per 1000 customers for mobile	voice	
<430>	Select from the drop-down list to indicate end-user customer complaints (zero or grethe prior calendar year for each service are an ETC for any facilities you own, operate,	ater) for broadband service in a in which you are designated	
<440>	Complaints per 1000 customers for fixed b	roadband	5.0E-4
<450>	Complaints per 1000 customers for mobile	broadband	

•	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	522447	
<015>	Study Area Name	TOLEDO TELEPHONE CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3608642044 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com	
<500>	Certify compliance with applicable service quality standards and consumer pro-	otection rules Yes	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	Service Quality & Protection 20: les Compliance	l6.pdf

(600) Functionality in Emergency Situations	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
	July 2013

<010>	Study Area Code	522447
<015>	Study Area Name	TOLEDO TELEPHONE CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten
<035>	Contact Telephone Number - Number of person identified in data line <030>	3608642044 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	statement demonstrating functionality in emergency situation-FCC Form 481 2016.pdf

(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	522447	
<015> Study Area Name	TOLEDO TELEPHONE CO	
<020> Program Year	2017	
<030> Contact Name - Person USAC should contact regarding this data	Dale Merten	
<035> Contact Telephone Number - Number of person identified in data	line <030> 3608642044 ext.	
<039> Contact Email Address - Email Address of person identified in data	line <030> dale@toledotel.com	
<701> Residential Local Service Charge Effective Date 1/1/2016 2702> Single State-wide Residential Local Service Charge		

<703>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
					Residential Local			Mandatory Extended Area	
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
ŀ									
ŀ					See at	tached worksheet			
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(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code 55	22447
<015>	Study Area Name	TOLEDO TELEPHONE CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten
<035>	Contact Telephone Number - Number of person identified in data line <030>	3608642044 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></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 attac	hed				
-				worksheet -					
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(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013
<010> Study Area Code	522447
<015> Study Area Name	TOLEDO TELEPHONE CO
<020> Program Year	2017
<030> Contact Name - Person USAC should contact regarding this data	Dale Merten
<035> Contact Telephone Number - Number of person identified in data line <030>	3608642044 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com

<810>	Reporting Carrier	The Toledo Telephone Co., Inc.
<811>	Holding Company	Name Not Available
<812>	Operating Company	The Toledo Telephone Co., Inc.

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
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(900) Tril	bal Lands Reporting	FCC Form	481
	lection Form		trol No. 3060-0986/OMB Control No. 3060-0819
		July 2013	
<010>	Study Area Code	522447	
<015>	Study Area Name	TOLEDO TELEPHONE CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten 3608642044 ext.	
<035>	Contact Telephone Number - Number of person identified in data line <030>	dale@toledotel.com	
<039>	Contact Email Address - Email Address of person identified in data line <030>		
<900>	Does the filing entity offer tribal land services? (Y/N)	No	
<910>	Tribal Land(s) on which ETC Serves		
<920>	Tribal Government Engagement Obligation	Name of Attached Document	
to confi	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached document(s), on line 920,	Select	
	trates coordination with the Tribal government pursuant to 8(a)(9) includes:	Yes or No or Not Applicable	
<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.		
	,		

			1 460
(1000) V	pice and Broadband Service Rate Comparability		FCC Form 481
Data Coll	ection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
			July 2013
<010>	Study Area Code		522447
<015>	Study Area Name		TOLEDO TELEPHONE CO
<020>	Program Year		2017
<030>	Contact Name - Person USAC should contact regarding this data		Dale Merten
<035>	Contact Telephone Number - Number of person identified in data line	e <030>	3608642044 ext.
<039>	Contact Email Address - Email Address of person identified in data line	e <030>	dale@toledotel.com
<1000>	Voice services rate comparability certification	Yes	
<1010>	Attach detailed description for voice services rate comparability compliance	ADDI	TIONAL VOICE RATE DATA 2016.pdf
			Name of Attached Document
<1020>	Broadband comparability certification		s - Pricing is no more than the most recent applicable benchmark announced by Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	ADDIT	TIONAL BROADBAND RATE DATA 2016.pdf
			Name of Attached Document

(1100) N	o Terrestrial Backhaul Reporting		FCC Form 481
	lection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	522447	
<015>	Study Area Name	TOLEDO TELEPHONE CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3608642044 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com	
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

(1200) Terms and Condition for	Lifeline Customers			FCC Form 481
Lifeline				OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Collection Form				July 2013
<010> Study Area Code			522447	
<015> Study Area Name			TOLEDO TELEPHONE CO	
<020> Program Year			2017	
<030> Contact Name - Person	USAC should contact regarding this data		Dale Merten	
<035> Contact Telephone Nur	nber - Number of person identified in data	ine <030>	3608642044 ext.	
<039> Contact Email Address	- Email Address of person identified in data	line <030>	dale@toledotel.com	
<1210> Terms & Conditions of	Voice Telephony Lifeline Plans			Name of Attached Document
<1220> Link to Public Website		НТТР		
or the website listed, on line 1220, c § 54.422(a)(2) annual reporting for annually report: <1221> Information describing	confirm that the attached document(s), on line ontains the required information pursuant to ETCs receiving low-income support, carriers muther terms and conditions of any voice is offered to Lifeline subscribers,	·		
<1222> Details on the number	of minutes provided as part of the plan, oll calls, and rates for each such plan.			

Data Collectio	ap Carrier Additional Documentation n Form -of-Return Carriers affiliated with Price Cap Local Exchange Carriers			CC Form 481 DMB Control No. 3060-0986/OMB Control No. 3060-0819 uly 2013
		522447		
	dy Area Code dy Area Name	TOLEDO TELEPHONE CO		
	gram Year	2017		
	tact Name - Person USAC should contact regarding this data	Dale Merten		
<035> Con	tact Telephone Number - Number of person identified in data line <030>	3608642044 ext.		
<039> Con	tact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com		
and Conne	ppropriate responses below (Yes, No, Not Applicable) to note ct America Phase II support as set forth in 47 CFR § 54.313(b)			
inc	remental Connect America Phase I reporting			
<2010>	2nd Year Certification 47 CFR § 54.313(b)(1)(i) - Note 2016 certification, this applies to Round 2 recipients Support			
<2011>	3rd Year Certification 47 CFR § 54.313(b)(1)(ii) - Note 2016 certification, this applies to Round 1 recipients Support	•		
<2022>	Recipient certifies, representing year two after filing acceptance of funding pursuant to 54.312(c), that the question are not receiving support under the Broadb Program or the Broadband Technology Opportunities projects that will provide broadband with speeds of a Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients or	e locations in and Initiatives s Program for at least 4		
<2023>	The attachment on line 2024 includes a statement of capital funding expended in the previous year in mee America Phase I deployment obligations, accompanie blocks indicating where funding was spent. This cove 54.313(b)(2)(ii). Round 2 recipients only.	eting Connect ed by a list of census		
<2024A>	Round 2 Recipient of Incremental Support?			
<2024B>	Attach list of census blocks indicating where funding two - 54.313(b)(2)(ii). Round 2 recipients only.	was spent in year	Name of Attached Document List Required Information	ing
<2025A>	Round 1 or Round 2 Recipient of Incremental Suppor	t?	•	
<2025B>	Attach geocoded Information for Phase I milestone re year three and Round 2 for year two) - Connect Ame Docket 10-90, Report and Order, FCC 13-	eports (Round 1 for	Name of Attached Document List Required Information	ing
<2015>	2016 and future Frozen Support Certification 47 CFR	§ 54.313(c)(4)		

Data Collection Forr	rrier Additional Documentation (Continued) m eturn Carriers affiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	
<2016>	Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification support used to build broadband America Phase II Reporting {47 CFR § 54.313(e)}		
<2017A>	Connect America Fund Phase II recipient?		
<2017B>	Attach information for Phase II - 54.313(e)(1) - list of geocoded locations already meeting the 54.309 public interest obligations at the end of calendar year 2015 and total amount of Phase II support, if any, the price	Name of Attached Document Listing Required Information	
<2018>	cap carrier used for capital expenditures in 2015. Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(2)(ii)	Name of Attached Document Listing Required Information	
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(2)(v)		
<2020>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 40% of its supported locations in the state on December 31, 2017 - 54.313(e)(3)		
<2021>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 60% of its supported locations in the state on December 31, 2018 - 54.313(e)(4)		
<2026>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 80% of its supported locations in the state on December 31, 2019 - 54.313(e)(5)		
<2027>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 100% of its supported locations in the state on December 31, 2020 - 54.313(e)(6)		

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	522447
<015>	Study Area Name	TOLEDO TELEPHONE CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten
<035>	Contact Telephone Number - Number of person identified in data line <030>	3608642044 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com

Complete the items below to note compliance with 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.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)				
(3010A)	Milestone Certification {47 CFR § 54.313(f)(1)(i)}		Yes - At	tach Certific	ation
					2016 Milestone Certification.doc
(3010B)	Please Provide Attachment	Name of Attached Doc Information	ument Lis	sting Required	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	No - No New Community	/ Anchors	5	
(3012B)	Please Provide Attachment	Name of Attached Doc Information	ument Lis	sting Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	O	0	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	lacksquare	O	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)			V	
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			V	2015_Form479.pdf
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Doc Information	ument Lis	sting Required	
(3018)	If the response is no on line 3014, is your company audited? 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:	(Yes/No)	0	0	
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers				
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows				
(3021)	Management letter and/or audit opinion 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 Doc Information	cument Lis	sting Required	

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	522447
<015>	Study Area Name	TOLEDO TELEPHONE CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten
<035>	Contact Telephone Number - Number of person identified in data line <030>	3608642044 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com

Financial Data Summary	4408261
(3027) Revenue	
(3028) Operating Expenses	3341357
(3029) Net Income	842798
(3030) Telephone Plant In Service(TPIS)	35406333
(3031) Total Assets	25978982
(3032) Total Debt	16427457
(3033) Total Equity	7398233
(3034) Dividends	0

(4005) Rural Broadband Experiment Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	522447
<015>	Study Area Name	TOLEDO TELEPHONE CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 3608642044 ext.
<039>	Contact Email Address - Email Address of person identified in data li	ine <030> dale@toledotel.com

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

relevant geographic area.

it yes to 4003A, please provide a response for 4003B.		
4003b . Provide the number, names and address of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar years.		
Broadband Deployment Locations – FCC 14-98	(paragraph 80)	
4004a . Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filideadline for the FCC Form 481.	ng Name of Attached Document Listing Required Information	
4004b . Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materimust at least detail the pricing, offered broadb speed and data usage allowances available in the	als and Name of Attached Document Listing Required Information ————————————————————————————————————	

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

<010>	Study Area Code	522447
<015>	Study Area Name	TOLEDO TELEPHONE CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten
<035>	Contact Telephone Number - Number of person identified in data line <030>	3608642044 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.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: TOLEDO TELEPHONE CO

Signature of Authorized Officer: CERTIFIED ONLINE Date 06/09/2016

Printed name of Authorized Officer: Dale Merten

Title or position of Authorized Officer: $^{\text{C.O.O}}$.

Telephone number of Authorized Officer: 3608642044 ext.

Study Area Code of Reporting Carrier: 522447 Filing Due Date for this form: 07/01/2016

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

	tion - Agent / Carrier Jection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	522447	
<015>	Study Area Name	TOLEDO TELEPHONE CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3608642044 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com	

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

	is authorized to submit the information reported on behalf of the reporting car my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authori d 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	can be punished by fine or forfeiture under the Communications Act of 1934, 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 Recipie	nts on Behalf of Reporting Carrier				
	norized to submit the annual reports for universal service support reporting carrier; and, to the best of my knowledge, the informat					
Name of Reporting Carrier:						
Name of Authorized Agent Firm:						
ignature of Authorized Agent or Employee of Agent: Date:						
Name of Authorized Agent Employee:						
Title or position of Authorized Agent or Employee of Agen	t					
Telephone number of Authorized Agent or Employee of A	gent:					
Study Area Code of Reporting Carrier:	Filing Due Date for this form:					
Persons willfully making false statements on this form	n can be punished by fine or forfeiture under the Communications Act of 18 of the United States Code, 18 U.S.C. § 1001.	1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title				



(700) Price Offerings including Voice Rate Data	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	522447
<015>	Study Area Name	TOLEDO TELEPHONE CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten
<035>	Contact Telephone Number - Number of person identified in data line <030>	3608642044 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com
<701>	Residential Local Service Charge Effective Date 1/1/2016	

<703>

<702> Single State-wide Residential Local Service Charge

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
				Residential Local			Mandatory Extended Area	
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge		Service Charge	Total per line Rates and Fees
WA	Toledo Telephone		FR	16.0	0.0	0.0	20.0	36.0

(710) Broadband Price	Offering
Data Collection Form	

FCC Form 481

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

July 2013

<010>	Study Area Code	522447
<015>	Study Area Name	TOLEDO TELEPHONE CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dale Merten
<035>	Contact Telephone Number - Number of person identified in data line <030>	3608642044 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dale@toledotel.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2> <d3></d3></d2>			<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	WA	Toledo Telephone	54.95	0.0	54.95	5.0	5.0	999999	Other, NONE
	WA	Toledo Telephone	74.95	0.0	74.95	10.0	10.0	999999	Other, NONE
	WA	Toledo Telephone	124.95	0.0	124.95	20.0	20.0	999999	Other, NONE
	WA	Toledo Telephone	174.95	0.0	174.95	50.0	50.0	999999	Other, NONE
	WA	Toledo Telephone	199.95	0.0	199.95	100.0	100.0	999999	Other, NONE
	WA	Toledo Telephone	250.0	0.0	250.0	10000.0	10000.0	999999	Other, NONE