

**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	509007
<015> Study Area Name	Q Link Wireless LLC
<020> Program Year	2014
<030> Contact Name: Person USAC should contact with questions about this data	Heather Kirby
<035> Contact Telephone Number: Number of the person identified in data line <030>	770-232-7805
<039> Contact Email Address: Email of the person identified in data line <030>	etclifelineforms@cgiminc.com

ANNUAL REPORTING FOR ALL CARRIERS		54.313 Completion Required	54.422 Completion Required
<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)		☐	☒
<310> Detail on Attempts (voice)	(attach descriptive document)	☐	☒
<320> Unfulfilled Service Requests (broadband)		☐	☒
<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			
<450> Mobile			
<500> Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	☐	☒
<510> ☐	(attach descriptive document)	☐	☒
<600> Functionality in Emergency Situations	(check to indicate certification)	☐	☒
<610> ☐	(attach 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> ☐	(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

509007

<015> Study Area Name

Q Link Wireless LLC

<020> Program Year

2014

<030> Contact Name - Person USAC should contact regarding this data

Heather Kirby

<035> Contact Telephone Number - Number of person identified in data line <030>

770-232-7805

<039> Contact Email Address - Email Address of person identified in data line <030>

etclifelineformeagmnc.com

<110> Has your company received its ETC certification from the FCC?

(yes / no) ☐ ☐

If your answer to Line <110> is yes, do you have an existing §54.202(a) "5

<111> 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.

Name of Attached Document (.pdf)

Please check these boxes below to confirm that the attached PDF, 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.

509007

<015>	Study Area Name
-------	-----------------

Q Link Wireless LLC

Program Year

2014

<030>	Contact Name

Heather Kirby

<035>	Contact Telephone Number - Number of person identified in data line <030>	770-232-7805

30> 770-232-7805

039> Contact Email Address - Email Address of person identified in data line <030> etc11f0c11necfcd

30> etclife@etclife.com

[illegible]

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

<010>	Study Area Code	509007
<015>	Study Area Name	Q Link Wireless LLC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Heather Kirby
<035>	Contact Telephone Number - Number of person identified in data line <030>	770-232-7805
<039>	Contact Email Address - Email Address of person identified in data line <030>	etclife@etformoecgmlnc.com

1/1/2013

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

[illegible]

(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	509007
<015>	Study Area Name	Q Link Wireless LLC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Beather Kirby
<035>	Contact Telephone Number - Number of person identified in data line <030>	770-232-7895
<039>	Contact Email Address - Email Address of person identified in data line <030>	etc1@onlineform@cgmlnc.com

[illegible]

<010>	Study Area Code	509007
<015>	Study Area Name	Q Link Wireless LLC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Heather Kirby
<035>	Contact Telephone Number - Number of person identified in data line <030>	770-232-7805
<039>	Contact Email Address - Email Address of person identified in data line <030>	etclifelineformocgmlnc.com
<810>	Reporting Carrier	Q LINK WIRELESS LLC
<811>	Holding Company	QUADRANT HOLDINGS GROUP LLC
<812>	Operating Company	N/A

[illegible]

**(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	509007
<015>	Study Area Name	Q Link Wireless LLC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Heather Kirby
<035>	Contact Telephone Number - Number of person identified in data line <030>	770-232-7605
<039>	Contact Email Address - Email Address of person identified in data line <030>	etccliffelineforms@gmine.com

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

<920> Tribal Government Engagement Obligation

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

Name of Attached Document (.pdf)

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	509007
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<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Heather Kirby
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<039>	Contact Email Address - Email Address of person identified in data line <030>	otclifelineforms@cmninc.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

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<015>	Study Area Name	Q Link Wireless LLC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Heather Kirby
<035>	Contact Telephone Number - Number of person identified in data line <030>	770-232-7805
<039>	Contact Email Address - Email Address of person identified in data line <030>	etclifolnforma@egmllnc.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

509007ut1210

Name of attached document (.pdf)

<1220> Link to Public Website

HTTP

"Please check these boxes below to confirm that the attached PDF, 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		FCC Form 481	
Data Collection Form		OMB Control No. 3060-0586/OMB Control No. 3060-0619	
Including Rate-of Return Carriers affiliated with Price Cap Local Exchange Carriers		July 2013	
<010>	Study Area Code	509007	
<015>	Study Area Name	Q Link Wireless LLC	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Heather Kirby	
<035>	Contact Telephone Number - Number of person identified in data line <030>	770-232-7805	
<039>	Contact Email Address - Email Address of person identified in data line <030>	otclife@lineformsdcgmlinc.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 PDF, 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		FCC Form 482	
Data Collection Form		OMB Control No. 3060-0085/OMB Control No. 3060-0019	
		July 2013	

<01>	Study Area Code	509007
<02>	Study Area Name	Q Link Wireless LLC
<03>	Program Year	2014
<04>	Contact Name - Person USAC should contact regarding this data	Heather Kirby
<05>	Contact Telephone Number - Number of person identified in data line <04>	770-232-7805
<06>	Contact Email Address - Email Address of person identified in data line <04>	heather.kirby@qlinkwireless.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.

Progress Report on 5 Year Plan

(3010) Milestone Certification (47 CFR § 54.313(f)(1)(i))
Please check this box to confirm that the attached PDF, on line 3012, contains the required information pursuant to § 54.313(f)(1)(i), as a recipient of CAF Phase I 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.

(3011) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))
Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report
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:

(3012) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)
(3013) PDF of Balance Sheet, Income Statement and Statement of Cash Flows
If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

(3014) 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:

(3015) Either a copy of their audited financial statements; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications PDF of Balance Sheet, Income Statement and Statement of Cash Flows

(3016) 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:

(3017) 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,
Underlying information subjected to a review by an independent certified public accountant

(3018) Underlying information subjected to an officer certification.
(3019) PDF of Balance Sheet, Income Statement and Statement of Cash Flows

(3020) Attach the worksheet listing required information

(3021) Name of Attached Document Listing Required Information

(3022) Name of Attached Document Listing Required Information

(3023) Name of Attached Document Listing Required Information

(3024) Name of Attached Document Listing Required Information

(3025) Name of Attached Document Listing Required Information

(3026) 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
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<039>	Contact Email Address - Email Address of person identified in data line <030>	etclifelineforms@cga-inc.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:	
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.	

Certification - Agent / Carrier	FCC Form 481
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<039> Contact Email Address - Email Address of person identified in data line <030>	etclifelineforms@cgainc.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) <u>FAS Tek Compliance Solutions, Inc.</u> 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:	FAS Tek Compliance Solutions, Inc.
Name of Reporting Carrier:	Q Link Wireless LLC
Signature of Authorized Officer:	CERTIFIED ONLINE Date: 10/11/2013
Printed name of Authorized Officer:	Issa Asad
Title or position of Authorized Officer:	CEO
Telephone number of Authorized Officer:	1800-610-1540
Study Area Code of Reporting Carrier:	509007 Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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:	Q Link Wireless LLC
Name of Authorized Agent or Employee of Agent:	FAS Tek Compliance Solutions, Inc.
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE Date: 10/11/2013
Printed name of Authorized Agent or Employee of Agent:	Heather Kirby
Title or position of Authorized Agent or Employee of Agent:	Regulatory Specialist
Telephone number of Authorized Agent or Employee of Agent:	770-232-7805
Study Area Code of Reporting Carrier:	509007 Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0386/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	509007
<015>	Study Area Name	Q Link Wireless LLC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Heather Kirby
<035>	Contact Telephone Number - Number of person identified in data line <030>	770-232-7805
<039>	Contact Email Address - Email Address of person identified in data line <030>	etc1@lineformusacmimo.com
<810>	Reporting Carrier	Q LINK WIRELESS LLC
<811>	Holding Company	QUADRANT HOLDINGS GROUP LLC
<812>	Operating Company	N/A

[illegible]

Lifeline Rates, Terms & Conditions

Plan 1: 68 Monthly Minutes Plan*

68 anytime minutes per month (unused minutes rollover)
(texts are one-third of one minute, i.e. 3 texts = 1 minute)
Net cost to Lifeline customer: **\$0 (free)**

This package includes:

- Free International Long Distance to countries designated at www.qlinkwireless.com

Plan 2: 125 Monthly Minutes Plan*

125 anytime minutes per month (unused minutes rollover)
(texts are one minute, i.e. 1 text = 1 minute)
Net cost to Lifeline customer: **\$0 (free)**

Plan 3: 250 Monthly Minutes Plan*

250 anytime minutes per month (unused minutes *do not* rollover)
(texts are one minute, i.e. 1 text = 1 minute)
Net cost to Lifeline customer: **\$0 (free)**

*All packages include:

- Free handset
- Free calls to Customer Service
- Free calls to 911 emergency services
- Free access to Voicemail, Caller-ID, and Call Waiting features
- Free Domestic Long Distance

Additional Minutes

50 minutes = \$10	150 minutes = \$30	500 minutes = \$50
100 minutes = \$20	200 minutes = \$35	unlimited minutes = \$60

Complete program terms and conditions located at www.qlinkwireless.com

International Long Distance

Free International Calling Destinations on the 68 Monthly Minutes Plan

(Certain special or off-network locations may be excluded from the Free International Long Distance. Calls to cellular phones are not included unless the word "Cellular" is specifically listed next to the country name. Numbers in parentheses () indicate the Country Code.)

Albania-Tirana (355)	France (33)	Mexico (52)
Andorra (376)	French Antilles (594)	Monaco (377)
Argentina (54)	French Guiana-Cellular (594)	Netherlands (31)
Australia (61)	French Guiana (594)	New Zealand (64)
Austria (43)	Georgia (995)	Norway (47)
Bahamas-Cellular (1)	Germany (49)	Panama (507)
Bahamas (1)	Gibraltar (350)	Paraguay (595)
Bangladesh-Cellular (880)	Greece (30)	Peru (51)
Bangladesh-Chittagong (880)	Guadeloupe (590)	Poland (48)
Bangladesh-Dhaka (880)	Guatemala-Telgua (502)	Portugal (351)
Bangladesh-Sylhet (880)	Hong Kong-Cellular (852)	Romania (40)
Belgium (32)	Hong Kong (852)	Russia-Cellular (7)
Bermuda-Cellular (1)	Hungary (36)	Russia (7)
Bermuda (1)	Iceland (354)	San Marino-Cellular (378)
Bolivia-La Paz (591)	India-Cellular (91)	San Marino (378)
Bolivia-Santa Cruz (591)	India (91)	Saudi Arabia-Riyadh (966)
Brazil (55)	Indonesia-Cellular (62)	Singapore-Cellular (65)
Brunei-Cellular (673)	Indonesia-Jakarta (62)	Singapore (65)
Brunei (673)	Indonesia-Surabaya (62)	Slovakia (421)
Bulgaria (359)	Iraq-Baghdad (964)	Slovenia (386)
Canada-Cellular (1)	Ireland (353)	South Korea-Cellular (82)
Canada (1)	Israel (972)	South Korea (82)
Chile (56)	Italy (39)	Spain (34)
China-Cellular (86)	Japan (81)	Sweden (46)
China (86)	Jordan (962)	Switzerland (41)
Columbia-Cellular (57)	Kazakhstan (7)	Taiwan-Cellular (886)
Columbia (57)	Kenya-Nairobi (254)	Taiwan (866)
Costa Rica (506)	Lithuania (370)	Thailand (66)
Croatia (585)	Luxembourg-Cellular (352)	Turkey (90)
Cyprus-Cellular (357)	Luxembourg (352)	United Kingdom (44)
Cyprus (357)	Macao-Cellular (853)	Uzbekistan (7)
Czech Republic (420)	Macao (853)	Venezuela (58)
Denmark (45)	Malaysia-Cellular (60)	Vietnam-Ho Chi Minh City (84)
Dominican Republic (1)	Malaysia (60)	Zambia (260)
Estonia (372)	Malta (356)	
Finland (358)		