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

July 25, 2022

Utah Public Service Commission  
Heber M. Wells Building 160  
East 300 South  
Salt Lake City, UT 84114

RE: Docket No: 21-038-01 -Albion Telephone Company, Inc.- 2022 FCC Form 481 – Annual Lifeline and High Cost Recertifications filing for SAC 509024 – and Request for Action and Officer Attestation – HCF Annual Recertification – Docket No. 22-999-05

Dear Staff:

Pursuant to FCC requirements under 47 C.F.R. 54.313 & 54.422, enclosed please find for filing a copy of Albion Telephone Company, Inc's 2022 submitted form 481 – Annual Eligible Telecommunications Carrier Certifications for SAC 509024.

At the same time, Albion Telephone Company, Inc. submits the attached Officer Attestation certifying the appropriate past and future use of High Cost Funds and Action Request for the Commission to include Albion Telephone Company, Inc. in its recertification verification to USAC and the FCC.

As the filing indicates, Albion Telephone Company, Inc. has not yet begun providing services to Utah subscribers.

Please do not hesitate to contact the undersigned directly with any questions about this report at [rredman@atccomm.com](mailto:rredman@atccomm.com)

Sincerely,

A handwritten signature in blue ink, appearing to read "Rich Redman", is written over a horizontal line.

Rich Redman  
President



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

# AFFIDAVIT

State of Idaho

County of Cassia

BEFORE ME, the undersigned authority appeared Richard Redman, who deposed and said:

My name is Richard Redman, I am the president of Albion Telephone Company, Inc. ("Company"). I am authorized to execute this affidavit on behalf of the Company. This affidavit is being given to support the Utah Public Service Commission's certification as contemplated in 48 C.F.R. 54.314.

Pursuant to the requirements of 47 C.F.R. 54.314, Albion Telephone Company, Inc. hereby certifies that it is eligible to receive federal high-cost support for the program years cited.

1. The Company certifies that it only used high-cost support received in Utah during the preceding calendar year (2021) for the provision, maintenance and upgrading of facilities and services for which support is intended.
2. Further, the Company certifies that all federal high-cost support provided to the Company in Utah will be used in the coming calendar year (2023) only for the provision, maintenance, and upgrading of facilities and services for which it is intended.

Richard Redman  
President  
Albion Telephone Company, Inc.

Subscribed and sworn to before me  
This 26 day of July, 2022.

Notary Public

Cassia

County, Idaho

My Commission Expires 7/24/2023



**FCC Form 481 - Carrier Annual Reporting**  
**Data Collection Form**

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
December 2020

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<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>	2086732208 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	jlaumb@atccomm.com
	Form Type	54.313 and 54.422

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<210> For the prior calendar year, were there any reportable voice service outages?

[illegible]

<010> Study Area Code

509024

<015> Study Area Name

Albion Telephone Company, Inc.

<020> Program Year

2023

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

Julie Laumb

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

2086732208 ext.

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

jlaumb@atccomm.com

<400> Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.

<410> Complaints per 1000 customers for fixed voice

<420> Complaints per 1000 customers for mobile voice

**(500) Compliance With Service Quality Standards and Consumer Protection Rules**  
**Data Collection Form**

**FCC Form 481**  
**OMB Control No. 3045-0047**  
**December 2020**

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com
<515>	Certify compliance with applicable minimum service standards	

**(600) Functionality in Emergency Situations**  
**Data Collection Form**

**FCC Form 481**  
**OMB Control No. 3060-0047**  
**December 2020**

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	509024ut610.pdf

**(800) Operating Companies  
Data Collection Form**

FCC Form 481

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

December 2020

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Co
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 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	Not Applicable
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<812> Operating Company Albion Telephone Company, Inc.

[illegible]



**(900) Tribal Lands Reporting  
Data Collection Form**

**FCC Form 481**  
**OMB Control No. 3060-0986/OMB Control No. 3060-0819**  
**December 2020**

<010> Study Area Code	509024
<015> Study Area Name	Albion Telephone Company, Inc.
<020> Program Year	2023
<030> Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035> Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com
<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

If your company serves Tribal lands, please select (Yes, No, NA) for each 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)(5) includes:

- <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.

Select Yes or No or Not Applicable

**(1000) Voice and Broadband Service Rate Comparability  
Data Collection Form**

FCC Form 481

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

December 2020

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<1000> Voice services rate comparability certification Not Applicable

<1010> Attach detailed description for voice services rate comparability compliance

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Name of Attached Document

<1020> Broadband comparability certification

Not Applicable - Please explain in the attachment to Line 1030

<1030> Attach detailed description for broadband comparability compliance

509024ut1030.pdf

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Name of Attached Document

**(1100) No Terrestrial Backhaul Reporting  
Data Collection Form**

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
December 2020

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.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 kbps upstream within the supported area pursuant to § 54.313(g).

<1140> Alaska Plan rate-of-return certification (yes, no, or not applicable) of compliance with approved performance plan.

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

FCC Form 481  
 OMB Control No. 3060-0986/OMB Control No. 3060-0819  
 December 2020

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

509024ut1210.pdf

Name of Attached Document

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

<1220> Link to Public Website

HTTP 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. ☒

**(2005) 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

December 2020

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of 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(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

<2015> 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)

**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)}**

<2017A> Connect America Fund Phase II recipient?

<2017C> Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2021.

<2018> 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)(1)(ii)(A)

Name of Attached Document Listing  
Required Information

**Connect America Phase II – FCC Form 470 Postings**

<2019> For the filing due July 1 following full implementation of this requirement, answer yes, no, or not applicable to this certification request

**(3005) Rate Of Return Carrier Additional Documentation****Data Collection Form****FCC Form 481****OMB Control No. 3060-0986/OMB Control No. 3060-0819****December 2020**

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

(3007) Does this filing retain a Cost Consultant and/or Firm, or other Third Party to prepare financial and operations data disclosures submitted to the National Exchange Carrier Association (NECA), USAC, or the Administrator?

(3007a)	(3007b)
Name of Consultant	Name of Consultant Firm/Third Party

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Comp.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carrier financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this attached below is accurate.

(3009) Progress Report on 5 Year Plan  
Carrier certifies to 54.313(f)(1)(iii)

(3010A) Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}

(3010B) Please Provide Attachment

Name of Attached Document Listing Required Information

**Rate-of-Return Community Anchor Institutions**

(3012A) Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.

(3012B) Please Provide Attachment

Name of Attached Document Listing Required Information

Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by 47 C.F.R. § 54.313(f)(1)(ii)

(3013) Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}

(Yes/No)

☐ ☐

(3014) If yes, does your company file the RUS annual report

(Yes/No)

☐ ☐

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:

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

☐

(3016) Document(s) with 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

Name of Attached Document Listing Required Information

(3018) If the response is no on line 3014, is your company audited?

(Yes/No)

☐ ☐

If the response is yes on line 3018, please check the boxes below to confirm your submission on line

**(3005) Rate Of Return Carrier Additional Documentation (Continued)**

FCC Form 481

**Data Collection Form**

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

December 2020

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
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<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

**Financial Data Summary**

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

#### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations and provide a list of newly served community anchor institutions.

#### 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 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.

#### RBE Community Anchor Institutions

<4003a> Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year

<4003b> Please Provide Attachment: Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by FCC 14-98 (paragraph 79)

Name of Attached Document Listing Required Information

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
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<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

5005 Alaska Plan

- |        |  |          |
|--------|--|----------|
| (5011) | Please indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previous calendar year in areas previously served exclusively by performance-limiting satellite backhaul.  | (Yes/No) |
| (5012) | If the filing carrier identified in its approved performance plans that it relies exclusively on satellite backhaul for a certain portion of the population in its service area, indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previous calendar year in areas that were previously served exclusively by satellite backhaul. | (Yes/No) |

[illegible]

(6005) Phase II Auction Reporting  
Data Collection Form

FCC Form 481

OMB Control No. :

December 2020

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<6010> Enter the total amount of Phase II Auction Support, if any, the carrier used for capital expenditures.

**Phase II Auction and New York Funds Certification**

<6011> Certify (either yes or no) regarding whether the recipient has available funds for all project costs that will exceed the amount of support that will be received for the next calendar year. This certification must be provided starting the first July 1st after receiving support until the recipient's penultimate year of support. (Yes/No)

**Phase II Auction Community Anchor Institutions**

<6012a> Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.

<6012b> Please Provide Attachment Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by FCC 14-98 (paragraph 79). Name of Attached Document Listing Required Information

**Phase II Auction FCC Form 470 Postings**

<6013> For the filing due July 1 following full implementation of this requirement answer yes, no, or not applicable to this certification request.

**Phase II Auction Post-Final Deployment Milestone Performance Certification**

<6014> Starting the first July 1st after meeting the final service milestone, certify (yes, no, or not applicable) that the Phase II-funded network that the Phase II auction recipient operated in the prior year meets the relevant performance requirements in § 54.309.

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

<7010> Phase II Auction recipient performance requirements certification (Yes/No)

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

**<8010> Uniendo a Puerto Rico Stage 2 Fixed – Capital Expenditures**

Enter the total amount of Uniendo a Puerto Rico Stage 2 fixed support, if any, the carrier used for capital expenditures.

**<8011> Uniendo a Puerto Rico Stage 2 Fixed – Available Funds Certification**

Certify (either yes or no) regarding whether the recipient has available funds for all project costs that will exceed the amount of support that will be received for the next calendar year. This certification must be provided starting the first July 1st after receiving support until the recipient's penultimate year of support.

**<8012a> Uniendo a Puerto Rico Stage 2 Fixed – Community Anchor Institutions**

Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.

Please Provide Attachment

**<8012b>** Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by 47 C.F.R. § 54.313(e)(2)(A). Allowable File Types.

Name of Attached  
Document Listing R  
Information

**Uniendo a Puerto Rico Stage 2 Fixed – FCC Form 470 Postings**

**<8013>** For the filing due July 1 following full implementation of this requirement answer yes, no, or not applicable to this certification request.

**<8014> Uniendo a Puerto Rico Stage 2 Fixed – Post-Final Deployment Milestone Performance Certification**

Starting the first July 1st after meeting the final service milestone, certify (yes or no) that the Uniendo a Puerto Rico Stage 2-funded network that the Stage 2 recipient operated in the prior year meets the relevant performance requirements in § 54.309.

**<8020> Uniendo a Puerto Rico Stage 2 Fixed – Support Reimbursement Certification**

54.313(n): Recipients of Uniendo a Puerto Rico Fund Stage 2 fixed support shall certify that such support was not used for costs that are (or will be) reimbursed by other sources of support, including of federal or local government aid or insurance reimbursements; and that support was not used for other purposes, such as the retirement of company debt unrelated to eligible expenditures, or other expenses not directly related to network restoration, hardening, and expansion consistent with the framework of the Uniendo a Puerto Rico Fund.

**<8030> Uniendo a Puerto Rico Stage 2 Fixed – Disaster Preparedness and Response Documentation**

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

**<9010> Connect USVI Stage 2 Fixed – Capital Expenditures**

Enter the total amount of Connect USVI Fund Stage 2 fixed support, if any, the carrier used for capital expenditures.

**<9011> Connect USVI Stage 2 Fixed – Available Funds Certification**

Certify (either yes or no) regarding whether the recipient has available funds for all project costs that will exceed the amount of support that will be received for the next calendar year. This certification must be provided starting the first July 1st after receiving support until the recipient's penultimate year of support.

**<9012a> Connect USVI Stage 2 Fixed – Community Anchor Institutions**

Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.

**<9012b> Please Provide Attachment**

Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by 47 C.F.R. § 54.313(e)(2)(i)(A).

Name of Attached  
Document Listing  
Information

**Connect USVI Stage 2 Fixed – FCC Form 470 Postings**

**<9013>** For the filing due July 1 following full implementation of this requirement answer yes, no, or not applicable to this certification request.

**Connect USVI Stage 2 Fixed – Post-Final Deployment Milestone Performance Certification**

**<9014>** Starting the first July 1st after meeting the final service milestone, certify (yes or no) that the Connect USVI Fund Stage 2-funded network that the Stage 2 recipient operated in the prior year meets the relevant performance requirements in § 54.309.

**Connect USVI Stage 2 Fixed – Support Reimbursement Certification**

**<9020>** 54.313(n): Recipients of Connect USVI Fund Stage 2 fixed support shall certify that such support was not used for costs that are (or will be) reimbursed by other sources of support, including of federal or local government aid or insurance reimbursements; and that support was not used for other purposes, such as the retirement of company debt unrelated to eligible expenditures, or other expenses not directly related to network restoration, hardening, and expansion consistent with the framework of the Connect USVI Fund.

**Connect USVI Stage 2 Fixed – Disaster Preparedness and Response Documentation**

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

### RDOF Capital Expenditures

- <10010> Starting the first July 1st after receiving support until the July 1st after the recipient's support term has ended, recipients of Rural Digital Opportunity Fund support must submit the total amount of support, if any, the recipient used for capital expenditures in the previous calendar year. This is required by 47 C.F.R. § 54.313(e)(2)(i)(B).

### RDOF Available Funds Certification

- <10011> Please provide a response (either yes or no) to this certification request for any recipient of Rural Digital Opportunity Fund support that the recipient has available funds for all project costs that will exceed the amount of support that will be received for the next calendar year. This certification must be provided starting the first July 1st after receiving support until the recipient's penultimate year of support, as required by required by 47 C.F.R. § 54.313(e)(2)(ii).

### RDOF Community Anchor Institutions

- <10012a> Recipients of Rural Digital Opportunity Fund support must attach a list containing the number, names, and addresses of community anchor institutions to which the eligible telecommunications carrier newly began providing access to broadband service in the preceding calendar year. This filing is required by 47 C.F.R. § 54.313(e)(2)(i)(A).

#### Please Provide Attachment

- <10012b> Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by 47 C.F.R. § 54.313(e)(2)(i)(A).
- Name of Attached Document Listing Required Information

### RDOF FCC Form 470 Postings

- <10013> For the filing due July 1st following full implementation of this requirement, please provide a response (either yes, no, or not applicable) to this certification request. Recipients of Rural Digital Opportunity Fund must respond affirmatively that they 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 (as described in § 54.501) located within any area in a census block where the carrier is receiving Rural Digital Opportunity Fund, and that such bids were at rates reasonable comparable to rates charged to eligible schools and libraries in urban areas for Instructions for Completing FCC Form 481 OMB Control No. 3060-0986 (High-Cost) OMB Control No. 3060-0819 (Low-Income) November 2020 Page 44 comparable offerings. This filing is required by 47 C.F.R. § 54.313(e)(2)(i)(C). This certification will not be required until the July 1st following the E-Rate program year that this obligation has been fully implemented. Modernizing the E-Rate Program for Schools and Libraries et al., WC Docket. Nos. 13-184, 10-90, 29 FCC Rcd 15538, 15566-67, 2010-72 (2014)

**Certification - Reporting Carrier  
Data Collection Form**
**FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
December 2020**

<010> Study Area Code	509024
<015> Study Area Name	Albion Telephone Company, Inc.
<020> Program Year	2023
<030> Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035> Contact Telephone Number - Number of person identified in data line <030>	2086732208 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 Telephone Company, Inc.	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 07/12/2022
Printed name of Authorized Officer: Richard Redman	
Title or position of Authorized Officer: President CEO	
Telephone number of Authorized Officer: 2086735335 ext.	
Study Area Code of Reporting Carrier: 509024	Filing Due Date for this form: 07/29/2022
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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  
December 2020**

<010> Study Area Code	509024
<015> Study Area Name	Albion Telephone Company, Inc.
<020> Program Year	2023
<030> Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035> Contact Telephone Number - Number of person identified in data line <030>	2086732208 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 Firm: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Name of Authorized Agent Employee: _____	
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.	

<010>	Study Area Code	509024
<015>	Study Area Name	Albion Telephone Company, Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com

I certify under penalty of perjury that no universal service support has been or will be used to purchase, obtain, maintain, improve, modify, or otherwise support any equipment or services produced or provided by any company designated by the Federal Communications Commission as posing a national security threat to the integrity of communications networks or the communications supply chain since the effective date of the designations.

Yes

Please Provide Waiver Document  
Allowable File Type (pdf only)

Name of Attached Document Listing Required  
Information

I certify that no Federal subsidy made available through a program administered by the Commission that provides funds to be used for the capital expenditures necessary for the provision of advanced communications services has been or will be used to purchase, rent, lease, or otherwise obtain, any covered communications equipment or service, or maintain any covered communications equipment or service previously purchased, rented, leased, or otherwise obtained, as required by 47 C.F.R. § 54.10.

Yes

Please Provide Waiver Document  
Allowable File Type (pdf only)

Name of Attached Document Listing Required  
Information

## Attachments

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
December 2020

OMB Control No. 3060-0986/OMB Control No. 3060-0819  
December 2020

December 2020

<010>	Study Area Code	509024
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<015>	Study Area Name	Albion Telephone Company, Inc.
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<020>	Program Year	2023
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<030>	Contact Name - Person USAC should contact regarding this data	Julie Laumb
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<035>	Contact Telephone Number - Number of person identified in data line <030>	2086732208 ext.
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<039>	Contact Email Address - Email Address of person identified in data line <030>	jlaumb@atccomm.com
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<810>	Reporting Carrier	Albion Telephone Company, Inc.
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<811>	Holding Company	Not Applicable
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<812>	Operating Company	Albion Telephone Company, Inc.
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[illegible]

Response Line 610  
Albion Telephone Company, Inc  
Study Area 509024

Functionality in Emergency Situations:

Albion Telephone Company, Inc. began receiving Rural Digital Opportunity Fund (RDOF) support in the 4<sup>th</sup> quarter of 2021. Albion is in the beginning stages of deploying network facilities in the service area for which the company was awarded RDOF support. Consequently, as of the end of 2021, Albion had yet to begin offering voice or broadband service in the study area. Albion will provide a description of how it is able to function in emergency situations in its 2023 Form 481 filing, by which time voice and broadband services will be available to customers in the study area.

Response to Line 1010  
Albion Telephone Company, Inc.  
509024

#### Voice Services Comparability Report

Albion Telephone Company, Inc. began receiving Rural Digital Opportunity Fund (RDOF) support in the 4<sup>th</sup> quarter of 2021. Albion is in the beginning stages of deploying network facilities in the service area for which the company was awarded RDOF support. Consequently, as of the end of 2021, Albion had yet to begin offering voice or broadband service in the study area. Albion will provide a comparability report in its 2023 Form 481 filing, by which time voice and broadband services will be available to customers in the study area.

Response to Line 1030  
Albion Telephone Company, Inc.  
509024

#### Broadband Services Comparability Report

Albion Telephone Company, Inc. began receiving Rural Digital Opportunity Fund (RDOF) support in the 4<sup>th</sup> quarter of 2021. Albion is in the beginning stages of deploying network facilities in the service area for which the company was awarded RDOF support. Consequently, as of the end of 2021, Albion had yet to begin offering voice or broadband service in the study area. Albion will provide a comparability report in its 2023 Form 481 filing, by which time voice and broadband services will be available to customers in the study area.

Response to Line 1210  
Albion Telephone Company, Inc.  
472213

## Terms & Conditions of Voice Telephone Lifeline Plans

### Lifeline Assistance Program

Low-income individuals eligible for Lifeline telephone assistance programs may be eligible for discounts from these basic local service charges through state specified telephone assistance plans. Hearing impaired customers may access the Relay Idaho for TTY service by calling a toll free number at 1-800-377-3529. There is no extra charge for this service.

### TERMS & CONDITIONS OF VOICE TELEPHONY LIFELINE PLANS

Residential customers of Albion Telephone Company, Inc. d/b/a ATC Communications ("the Company") who qualify for the Lifeline Program receive a discount of \$7.75 on local voice telephony service only (\$5.25 federal discount + \$2.50 state discount).

For all of the Company's exchanges, the Lifeline single-line residential local rate, including any mandatory extended area service charge and the federal subscriber line charge is \$24.51 (\$32.26 standard rate - \$7.75 discount) or Measured Service of \$16.75 (\$24.50 standard rate - \$7.75 discount).

All single-line residential customers, including Lifeline customers, have an unlimited number of minutes for local calls made within the local calling area. Measured Service customers, including Lifeline customers have unlimited minutes of incoming calls and 90 minutes of outgoing calls made within the local calling area. Safety Line customers, including Lifeline customers have 500 minutes of incoming calls and 10 minutes of outgoing calls made within the local calling area.

For calls outside of the local calling area the customer may choose one of the following ATC Long Distance calling plans: Plan 1 \$6.95/month and in state calls .12/minute, out of state calls .05/minute. Plan 2 \$4.95/month and in state calls .12/minute, out of state calls .07/minute. Plan 3 no recurring monthly fee, in state calls .12/minute, out of state calls .10/minute. Customers may also choose a long distance carrier of their choice. Customers may also elect to subscribe to toll blocking at no charge.

Lifeline Program reductions do not apply to additional services such as custom calling features. Lifeline customers may subscribe to these services, where available, at the same rates offered to other customers.

### ELIGIBILITY OF LIFELINE ASSISTANCE PROGRAM

Any residential customer who is: Head of the household, Income eligible (income cannot exceed 135% of federal poverty guideline) or a participant in one of the following federal assistance programs: Medicaid, Supplemental Nutrition Assistance Program (Food Stamps or SNAP), Supplemental Security Income (SSI), Federal Public Housing Assistance (Section 8), Low-Income Home Energy Assistance Program (LIHEAP), Temporary Assistance to Needy Families (TANF), National School Lunch Program's Free Lunch Program, Head Start.

Lifeline service is limited to one discount per household. A household is everyone who lives in the home (including children and people who are not related to the customer) and shares income and household expenses (bills, food, etc.). A customer with Lifeline service may not transfer the Lifeline benefit to any other person. Lifeline is a nontransferable benefit.

To make sure that our customers continuously receive quality service, any service problems can be reported to ATC Communications twenty-four hours a day, seven days a week. Basic services are offered at the rates, terms and conditions specified in the Company's tariff on file with the Idaho Public Utility Commission. If you have questions or seek additional information regarding the Company's services or rates, please call ATC Communications' business office at 208-673-5335.



Response to Line 3010b  
Albion Telephone Company, Inc.  
509024

#### Certification of Public Interest Obligations

Albion Telephone Company, Inc. began receiving Rural Digital Opportunity Fund (RDOF) support in the 4<sup>th</sup> quarter of 2021. Albion is in the beginning stages of deploying network facilities in the service area for which the company was awarded RDOF support. Consequently, as of the end of 2021, Albion had yet to begin offering voice or broadband service in the study area. Albion will provide a certification of Public Interest Obligations in its 2023 Form 481 filing, by which time voice and broadband services will be available to customers in the study area.