	m 481 - Carrier Annual Reporting illection Form		Ang Burdur Estabate par	0%8 3060 5981 OMB 8060 0834 Respondent 20 Huur
<010>	Study Area Code	808413		
<015>	Study Area Name	Sycamore Telephone	Company	
<020>	Program Year	2014		
<030>	Contact Name: Person USAC should contact with questions about this data	Steve Ekleberry		
<035>	Contact Telephone Number: Number of the person identified in data line <030>	419-927-6012		
<039>	Contact Email: Email of the person identified in data line <030>	steve.ekleberry@syctelco.co	m	
ANNUA	L REPORTING FOR ALL CARRIERS		54,313 Completion Required	54 422 Completion Required
<100>	Service Quality Improvement Reporting	(complete attached worksheet)	(check box w	hen complete)
<200> <210>	Outage Reporting (voice)	(complete attached worksheet) ages to report		
<310>	Unfulfilled Service Requests (voice) Detail on Attempts (voice) Unfulfilled Service Requests (broadband) Detail on Attempts (broadband)	0 0 (attach descriptive document) (attach descriptive document)	>>>>	
<400> <410> <420> <440> <450>	Number of Complaints per 1,000 customers (voice) Fixed 0.06% Mobile 0.00% Number of Complaints per 1,000 customers (broadband) Fixed Mobile			
<500>	Service Quality Standards & Consumer Protection Rules Co			1
<610> <700>	Functionality in Emergency Situations Company Price Offerings (voice)	(attached descriptive document) (check to indicate certification) (attached descriptive document) (complete attached worksheet)	//////////////////////////////////////	
<800> <900>	Company Price Offerings (broadband) Operating Companies and Affiliates Tribal Land Offerings (Y/N)? Voice Services Rate Comparability	(complete attached worksheet) (complete attached worksheet) (if yes, complete attached worksheet) (check ta indicate certification)	n/a / n/a n/a	
<1110>	Terrestrial Backhaul (Y/N)? Terms and Condition for Lifeline Customers	(attach descriptive document) (if not, check to indicate certification) (complete attached worksheet) (complete attached worksheet)	n/a no n/a	
	Price Cap Carriers, Proceed to <u>Price Cap Additional Docu</u> Including Rate-of-Return Carriers affiliated with Price Cap			
<2000> <2005>		(check to indicate certification) (complete attached worksheet)		
<3000>	Rate of Return Carriers, Proceed to <u>ROR Additional Docu</u>	Imentation Worksheet (check to indicate certification)		888 800 M

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(complete attached worksheet)

	Data Collection Form			FCC Form 481 OMB Control No 3060-0986
				OMB Control No 3060-0819 July 2013
<010>	Study Area Code		808413	
<015>	Study Area Name		Sycamore Telephone Company	
<020>	Program Year		2014	
<030>	Contact Name - Person USAC should contact regarding this data		Steve Ekleberry	
<035>	Contact Telephone Number - Number of person identified in data line <030>		419-927-6012	
<039>	Contact Email Address - Email Address of person identified in data line <030>		steve.ekleberry@syctelco.com	
<110>	Has your company received its ETC certification from the FCC?	(yes / no)	yes	
111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no)	οu	
	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 receives only frozen support, your progress report is only restricted to address value telephony convice			
	Please check these boxes below to confirm that the attached PDF, on line 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.	Name	Name of Attached Document (.pdf)	
 (113) (114) (115) (115) (116) (117) (118) (118) 	Maps detailing progress towards meeting plan targets Report how much universal service (USF) support was received How (USF) was used to improve service quality How (USF) was used to improve service coverage How (USF) was used to improve service capacity Provide an explanation of network improvement targets not met in the prior calendar year.			

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<010> Study Area Code <015> Study Area Code <015> Study Area Name <015> Study Area Name <015> Contact Name <020> Program Vear <030> Contact Name - Person USAC should contact regarding this data <035> Contact Telephone Number - Number of person identified in data line <030> <035> Contact Fmail Address - Fmail Address of person identified in data line <030>

<#>	Preventative Procedures												
\$	Service Outage Resolution												
÷	Did This Outage Affect Multiple Study Areas (Yes / No)												
60	Service Outage Description (Check all that apply)									1			
 b>	911 Facilities Affected (Yes / No)												
<2>	Total Number of Customers								1				
<c1></c1>	Number of Customers Affected												
<table< td=""><td>Outage End Time</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></table<>	Outage End Time												
<03>	Outage End Date												
 b2>	Outage Start Time												
<10>	Outage Start Outage Start Outage End Date Time Date												
~8>	NORS Reference Number	N/A											
<220>			 		,						 		

State: Ohio

Sycamore Telephone Co.

Form 481 Line No.: 510 Compliance with Service Quality Standards and Consumer Protection

As Required by Ohio Administrative Code "4901:1-6-12 Service Requirements for Basic Local Exchange Service (BLES)" the local services provided by Sycamore Telephone Co. are provided under internal company operating procedures and tariffs which are in compliance with applicable Ohio Public Utility Commission orders and rules including:

4901:1-6-12(c)

- (1) BLES shall be installed within five business days of the receipt by a telephone company of a completed application for new access line service, unless the customer requests or agrees to a later date.
- (2) The requirements to install BLES in paragraph (c)(1) of this rule is not applicable where any of the following exist:
 - (a) A customer or applicant has not met pertinent tariff requirements.
 - (b) The need for special equipment or service.
 - (c) Military action, war, insurrection, riot or strike.
 - (d) The customer misses an installation appointment
- (3) A LEC shall make responsible efforts to repair a BLES outage within twenty-four hours, excluding Sundays and legal holidays, after the outage is reported to the telephone company.
- (4) A BLES service outage or service-affecting problem shall be repaired within seventy-two hours after it is reported to the telephone company.
- (5) If a BLES outage is reported to the telephone company and it lasts more than seventytwo hours, the LEC shall credit every affected BLES customer, of which the LEC is aware, in the amount of one month's charges for BLES.
- (6) The customer credit in paragraph (c)(5) of this rule is not applicable if the condition or failure to repair occurs as a result of any of the following:
 - (a) A customer's negligent or willful act
 - (b) Malfunction of customer-owned telephone equipment or inside wire.
 - (c) Military action, war, insurrection, riot, or strike
 - (d) Customer missing a repair appointment.

State: Ohio

Sycamore Telephone Co.

Form 481 Line No.: 610 Description of Functionality in Emergency Situations

Sycamore Telephone Co., pursuant to Ohio Administrative Code "4901:1 1-6-31 Emergency and Outage Operations".

4901:1-6-31 Emergency and outage operations.

- (A) Each Facilities-based local exchange carrier (LEC) shall design, operate and maintain its facilities to continue to provide customers with the ability to originate and receive calls at all times. This commission will utilize existing FCC rules applicable to emergency and outage operations. Companies shall submit outage reports utilizing, at the company's discretion, either existing FCC reports or a format determined by the commission.
- (B) Each facilities-based LEC shall submit, within two hours of discovery, to the commission's outage coordinator and when appropriate, the news media in the affected area, a notification that it has experienced an outage, whenever that outage occurs on any facility that it owns, operates, leases or otherwise utilizes and it both:
 - (1) Expected to last for a period in excess of thirty minutes.
 - (2) Potentially affects at least nine hundred thousand user minutes in the incumbent local calling area.
- (C) Each Facilities-based LEC shall report, by telephone or electronic means, a disruption of 9-1-1 services, which impairs 9-1-1 service within a given county 9-1-1 system, immediately to each county 9-1-1 public safety answering point, to the Ohio 9-1-1 coordinator, and to the news media in the affected area, when appropriate.
- (D) Each facilities-based LEC experiencing a loss of communications or selective routing to a public safety answering point, as a result of an outage described under paragraphs (B) and (C) of this rule, shall also notify, as soon as possible, by telephone or electronic means, any official who has been designated by the management of the affected 9-1-1 facility as the LEC's contact person for communication outages at that facility; and the LEC shall convey to that person all available information that may be useful to the management of the affected facility in mitigating the effects of the outage on efforts to communicate with that facility.
- (E) Each facilities-based LEC experiencing an outage described under paragraphs (B) and (C) of this rule, shall electronically submit to the commission's outage coordinator the same information as that provided to the FCC or the following information:
 - (1) A notification that it has experienced an outage, which shall include the name of the reporting entity, the date and time of the onset of the outage, a brief description of

State: Ohio

Sycamore Telephone Co.

Form 481 Line No.: 610 Description of Functionality in Emergency Situations

the problem, the particular service affected, the geographic area affected by the outage, the number of customers affected, an estimate of when the service, including 9-1-1, will be restored, and a contact name and telephone number by which the commission's outage coordinator at contact the reporting entity.

- (2) Not later than seventy-two hours after discovering the outage, an initial communications outage report, which shall include all pertinent information then available on the outage and shall be submitted in good faith.
- (3) Not later than thirty days after discovering the outage, the provider shall submit electronically a final communications outage report, which shall include all pertinent information on the outage, including any information that was not contained in, or that had changed from that provided in, the initial report.
- (F) Each facilities-based LEC shall develop, implement, and maintain an emergency plan and make it available for review by commission staff. The plan shall include, but not limited to all of the following:
 - to, all of the following:
 - (1) Procedures for maintaining and annually updating a list of those customers who have subscribed to the federal telecommunications service priority program, as identified in 47 C.F.R. 64, appendix A.
 - (2) Procedures for priority treatment in restoring out-of-service trouble of an emergency nature for customers with documented medical or life-threatening condition.
 - (3) In addition to the telecommunications service priority program, each LEC shall develop policies and procedures regarding those customers who require priority treatment for out-of-service clearance. Such procedures shall include a table of restoration priority, including, but not limited to, subscribes such as police and fire stations, hospitals, key medical personnel, and other utilities.
 - (4) Procedures for restoring service to priority critical facilities customers.
 - (5) Identification and annual updates for all of the facilities-based LEC's critical facilities and reasonable measures to protect its personnel and facilities.
 - (6) Assessments and evaluations of telecommunications facilities available to provide back-up service capabilities.
 - (7) Procedures for after-action assessments and reporting following activation of any part of the emergency plan. An after-action report will be written and will include

State: Ohio

Sycamore Telephone Co.

Form 481 Line No.: 610 Description of Functionality in Emergency Situations

lessons learned, deficiencies in the response to the emergency, and deficiencies in the emergency plan.

- (8) A current list of names and telephone numbers of the facilities-based LEC's emergency service personnel to contact and coordinate with in the event of a real or anticipated local or national threats to its ability to provide telecommunications service.
- (9) A current list of the names and telephone numbers of the facilities-based LEC's emergency service personnel that is made available to the commission's emergency coordinator, upon request.
- (10) A continuity of operations plan to assume continuance of minimum essential functions during a large scale event in which staffing is reduced. Such plans shall provide for:
 - (a) Plan activation triggers such as the world health organization's pandemic phase alert levels, widespread transmission within the United States, or a case at one or more locations within Ohio.
 - (b) Identification of a pandemic coordinator and team with defined roles and responsibilities for preparedness and response planning.
 - (c) Identification of minimal essential functions, minimal staffing required to maintain such essential functions, and personnel resource pools required to ensure continuance of those functions in progressive stages associated with a declining workforce.
 - (d) Identification of essential employees and critical inputs (e.g., raw materials, equipment, suppliers, subcontractor services/products, and logistics) required to maintain business operations by location and function.
 - (e) Policies and procedures to address personal protection initiatives.
 - (f) Policies and procedures to maintain lines of communication with the public utilities commission of Ohio during a declared emergency.
 - (g) Each facilities-based LEC shall amend its emergency plan in accordance with the findings identified in the after-action assessment report required under paragraph (F)(7) of this rule.

(800) Operating Companies and Affiliates Data Collection Form		FCC Form 481 OMB Control No. 3060-0985 OMB Control No. 3060-0819 July 2013
<010> Study Area Code	808413	
<015> Study Area Name	Sycamore Telephone Company	Aueduce
<020> Program Year	2014	
<030> Contact Name - Person USAC should contact regarding this data	Steve Ekleberry	
<035> Contact Telephone Number - Number of person identified in data line <030>	419-927-6012	
<039> Contact Email Address - Email Address of person Identified in data line <030>	steve.ekleberry@syctelco.com	co.com
<810> Reporting Carrier		
t I.		
<812> Operating Company		
<813> <a1></a1>	<82>	
Affiliates	SAC	Doing Business As Company or Brand Designation
N/A		
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Page 4

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OMB Control No. 3060-0986

FCC Form 481

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<010> Study Area Code	ea Code	808413	
<015> Study Area Name	ea Name	Sycamore Telephone Company	
<020> Program Year	Year	2014	
30> Contact	<030> Contact Name - Person USAC should contact regarding this data	Steve Ekleberry	
35> Contact 1	<035> Contact Telephone Number - Number of person identified in data line <030>	419-927-6012	
39> Contact {	<039> Contact Email Address - Email Address of person identified in data line <030>	steve.ekleberry@syctelco.com	

Tribal Government Engagement Obligation <920>

Name of Attached Document (.pdf)

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)(9) includes:

- Feasibility and sustainability planning; <922>
- Marketing services in a culturally sensitive manner; <923>
 - Compliance with Rights of way processes <924>
- Compliance with Land Use permitting requirements <925>
 - Compliance with Facilities Siting rules <926>
- Compliance with Cultural Preservation review processes Compliance with Environmental Review processes <927> <928>
- Compliance with Tribal Business and Licensing requirements. <929>

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	FCC Form 481
	OMB Control No. 3060-0819 July 2013
<010> Study Area Code	808413
<015> Study Area Name	Sycamore Telephone Company
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	a Steve Ekleberry
<035> Contact Telephone Number - Number of person identified in data line <030>	ta line <030>
<039> Contact Email Address - Email Address of person identified in data line <030>	lata line <030> steve.ekleberry@syctelco.com
Please check this box to confirm no terrestrial backhaul <1120> options exist within the supported area pursuant to § 54.313(G)	
Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps unstream within the supported area nursulant to 6.54.313(G)	5

(1200) Terms and Condition for Lifeline Customers	ECC Form 481
Lifeline	OMB Cantrol No. 3060-0986
	OMB Control No 3060-0819
Data Collection Form	July 2013
2010s - Chindre Anna Carda	
SULUS SILLING ALES LODE	8U8413
<015> Study Area Name	Sycamore Telephone Company
<020> Program Year	2014

<020>	<020> Program Year	2014
<030>	<030> Contact Name - Person USAC should contact regarding this data	Steve Ekleberry
<035>	<035> Contact Telephone Number - Number of person identified in data line <030>	419-927-6012
<039>	<039> Contact Email Address - Email Address of person identified in data line <030>	steve.ekleberry@syctelco.com

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See Attached Name of attached document (.pdf)

<1220> Link to Public Website

НТТР _____

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

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



P.U.C.O. NO. 13

LIFELINE REQUIREMENTS

(T)

(N)

The Company shall provide Lifeline service as defined in 47 C.F.R. § 54.401 (a) on a nondiscriminatory basis to all qualifying low-income customers. The Company's Lifeline service offering shall comply with all applicable federal and state laws, including, but not limited to, 47 C.F.R. Part 54, Subpart E; the FCC's Lifeline reform order (Report and Order released February 6, 2012, WC Docket No, 11-42, et. al) and any subsequent clarifying orders; Section 4927.13, Revised Code; Rule 4901:1-6-19, Ohio Administrative Code; and, the Commission's nontraditional Lifeline service order (Finding and Order adopted May 23, 2012, Case No. 10-2377-TP-COI) and any subsequent entries and/or orders.



Application for Telephone Assistance Program Sycamore Telephone Company

Lifeline

Benefits:

REDUCED MONTHLY CHARGES

- 1. Monthly discount of \$9.25 (\$6.50 Subscriber Line Charge + \$2.75 Local Service discount).
- 2. No customer deposit required if you elect long-distance blocking.
- 3. Free blocking of long-distance and "900/976" numbers upon request.
- 4. No restrictions on optional services, such as Caller ID and Call Waiting.

Restrictions:

1. The Lifeline discount applies only to one phone line (including cellular phone service) per customer in your household.

For Sycamore Telephone Company use:

Approved

Not Eligible

- * Provide copy to Applicant
- * Original (with any attachments) to Lifeline file

Signature of Customer Service Representative

Discount Effective Date

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Incremental Connect America Phase I reporting 2nd Year Certification (47 CFR § 54.313(b)(1) 3rd Year Certification (47 CFR § 54.313(b)(2)) Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a)) 2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2015 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support (47 CFR § 54.313(d)) Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband Certification Support Used to Build Broadband Certification Support Used to Build Broadband Certification Support Used to Build Broadband Tote Cap Carrier Phase I Reporting (47 CFR § 54.313(d)) 3rd Year Broadband Service Certification Sth Year Broadband Servi				
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community anchor institutions to which began providing access to broadband service in the preceding calendar year. Interim Progress Ccmmunity Anchor Institutions		of CAF Phase II support shall provide the number, names, and addresses of		
service in the preceding calendar year. Interim Progress Community Anchor Institutions		community anchor institutions to which began providing access to broadband		
Interim Progress Community Anchor Institutions		service in the preceding calendar year.		
	<2021>	Interim Progress Community Anchor Institutions	Name of Attached Document Listing Required Information	

Page 8

(3005) R	(3005) Rate Of Return Carrier Additional Documentation		FCC Form +21
Data Col	Data Collection Form		OMB Cantrel Nu Hiter U386
			CIAB Concret No. 1000 0819
1	و در در در از بر از میگرد <mark>د. از این</mark> از میکوردان میکورد این و مورد و مواد میکورد و این میکورد و در میکرد. از میک		Autor 2013
<010>	Study Area Code	808413	
<015>	L -	Sycamore Telephone Company	
<020>	Program Year	2014	
<030>	Contact Name - Person	Steve Ekleberry	
<0355 <0355	Contact Fulephone Number - Number of person identified in data line <230> Contact Email Address - Email Address of person identified in data line <030>	419-927-6012 steve.ekleberrv@svcteico.com	
CHECK	CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.302(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CHECK the boxes below to note compliance with the financial reporting requirements set forth in 47	its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the 1 CFR § 54.313(9(2). 1 further carrify that the information reported on this form and in the documents attached below is accurate.	compliance with the financial reporting requirements set forth in 47 hed below is accurate.
	Progress Report on 5 Year Plan		
(3010) (3011)	Milestone Certification (47 CFR § 54.313(f)(1)) Please check this box to confirm that the attached PDF , on line 3012,	Name of Attached Document Listing Required Information	N/A this year
]
12171	Community Archor Inst	Name of Attached Dorumont Listing Revuined Information	N/1 this year
(3014)			yes (Yes/No) yes (Yes/No)
(3015)			
(3016)	Telecommunications Borrowers) PDF of 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 Reguired Information	ŭ
(3018)			(Yes/No)
	If the response is yes on line 30.18, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains		
(3019)	Either a copy of their au		
(3020)	in a roumar comparable to kup operating keport for Leecommunications PDF of Batance Sheet, income Statement and Statement of Cash Flows		
(3021)	Management jetter issued by the independent centified 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),		
(3022)			
(E20E)			
(3024)	public accountant Underlying information subjected to an officer certification.		
(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		

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Name of Attached Document Listing Required Information

(3026) Attach the worksheet listing required information

	tion - Reporting Carrier		FCC Form 481
Data Col	lection Form		OMB Control No. 3060-0986
			OMB Control No. 3060-0819
			July 2013
<010>	Study Area Code	808413	
<015>	Study Area Name	Sycamore Telephone Compar	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Steve Ekleberry	
<035>	Contact Telephone Number - Number of person identified in data line <030>	419-927-6012	
<039>	Contact Email Address - Email Address of person identified in data line <030>	steve.ekleberry@syctelco.cor	

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

I certify that I am an officer of the reporting car recipients; and, to the best of my knowledge, the		ude ensuring the accuracy of the annual report this form and in any attachments is accurate.	ing requirements for universal service support
Name of Reporting Carrier: SYCAMORE TELEPI	ONE COMPANY		
Signature of Authorized Officer:	ch		Date 10/15/13
Printed name of Authorized Officer: STEVE EK	EBERRY		
Title or position of Authorized Officer: GENER	L MANAGER/TREASURER		
Telephone number of Authorized Officer: 419-9	27-6012		
Study Area Code of Reporting Carrier:	808413	Filing Due Date for this form:	10/15/2013

This foregoing document was electronically filed with the Public Utilities

Commission of Ohio Docketing Information System on

10/15/2013 1:56:45 PM

in

Case No(s). 13-1115-TP-COI

Summary: Report FCC Form 481 electronically filed by Ms. Teresa L Thomas on behalf of Sycamore Telephone Company