



**Moore & Liberty Telephone Company**

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— FAX COVERSHEET —

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**To:** ND FSC

**From:** Shelie Bunn

**Fax:** 701-328-2410

**Pages:** 4

**Re:** 2<sup>nd</sup> Qtr 2008 Form 497

**Date:** 7/15/08

**Comments:**

FCC 497  
October 2000

**LIFELINE AND LINK UP WORKSHEET**

Approved by OMB  
3060-0819  
Avg. Burden Est. per Respondent: 3.0 Hrs.

USAC Service Provider Identification Number (1) 143002209

Serving Area (2) 381622

<b>(3)</b>		<b>(4)</b>	
Company Name:	<u>Moore &amp; Liberty Telephone Company</u>	a) Submission Date:	<u>07/15/08</u>
Mailing Address:	<u>301 Dewey St</u> <u>PO Box 66</u> <u>Enderlin, ND 58027</u>	b) Data Month:	<u>April-08</u>
Contact Name:	<u>Shelle Bunn</u>	c) Type of filing (Check one):	Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>
Telephone Number:	<u>701-437-3300</u>	d) State Reporting:	<u>North Dakota</u>
Fax Number:	<u>701-437-3022</u>		
E-mail Address:	<u>sbunn@mlgc.com</u>		

Lifeline		# Lifeline Subscribers (a)		Lifeline Support/Subscriber (b)*	=	Total Lifeline Support (c)
Tier 1 Low-Income Subscribers receiving federal Lifeline Support	(5)	<u>70</u>	x	\$ <u>6.50</u>	=	\$ <u>455.00</u>
Tier 2 Low-Income Subscribers receiving federal Lifeline Support	(6)	<u>70</u>	x	\$ <u>1.75</u>	=	\$ <u>122.50</u>
Tier 3 Low-Income Subscribers receiving federal Lifeline Support	(7)		x	\$ _____	=	\$ _____
Tier 4 Low-Income Subscribers receiving federal Lifeline Support	(8)		x	\$ _____	=	\$ _____

Check box to the right if partials or pro rata amounts are used. Indicate dollar amount, if applicable, on line 9.  \$ (2.74) (9)  
NOTE: (Do not include partials or pro rata amounts on lines 5 - 8 above)

Total federal Lifeline support claimed (Sum of lines 5c, 6c, 7c, 8c & 9) \$ 574.76 (10)

\* For multiple rates, use an average amount

Link Up		Non-Tribal (a)		Tribal (b)		Total Link Up (c)
Number of Connections waived	(11)	<u>0</u>				
Charges waived per Connection	(12) *	\$ _____ (\$30 max)		\$ _____ (\$100 max)		
Total Connection charges waived	(13)	\$ _____		\$ _____		
Deferred Interest	(14)	\$ _____		\$ _____		
Total Link Up dollars waived	(15)	\$ _____ +		\$ _____ =		\$ <u>0</u> (15c)

\* For multiple rates, use an average amount

Toll-Limitation Services (TLS)			Total TLS dollars claimed	
Incremental cost of providing TLS	(16)	\$ _____		
Number of subscribers for whom TLS initiated	(17)	_____		\$ <u>0</u> (18)

Presubscribed Interexchange Carrier Charge (PICC)		(For Price-cap companies only; prior to 7/1/2000)	Total PICC dollars waived	
Monthly charge per line	(19)	\$ _____		
Number of Subscribers per month	(20)	_____		\$ <u>0</u> (21)

ETC Payment (22)				
Total Lifeline \$	<u>574.76</u>	Total TLS \$	<u>0</u>	
Total Link Up \$	<u>0</u>	Total PICC \$	<u>0</u>	
		Total Dollars \$	<u>574.76</u>	

If you have any questions, please call USAC at (973) 884-8027 or (973) 884-8553

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October 2000

**LIFELINE AND LINK UP WORKSHEET**

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3060-0819

Avg. Burden Est. per Respondent: 3.0 Hrs.

USAC Service Provider Identification Number (1) 143002209

Serving Area (2) 381622

(3)		(4)	
Company Name:	<u>Moore &amp; Liberty Telephone Company</u>	a) Submission Date	<u>07/15/08</u>
Mailing Address:	<u>301 Dewey St</u>	b) Data Month	<u>May-08</u>
	<u>PO Box 66</u>	c) Type of filing (Check one):	Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>
	<u>Enderlin, ND 58027</u>	d) State Reporting	<u>North Dakota</u>
Contact Name:	<u>Shelle Bunn</u>		
Telephone Number:	<u>701-437-3300</u>		
Fax Number:	<u>701-437-3022</u>		
E-mail Address:	<u>sbunn@mltc.com</u>		

Lifeline		# Lifeline Subscribers (a)		Lifeline Support/ Subscriber (b)*		Total Lifeline Support (c)
Tier 1 Low-Income Subscribers receiving federal Lifeline Support	(5)	<u>68</u>	x	\$ <u>6.50</u>	=	\$ <u>442.00</u>
Tier 2 Low-Income Subscribers receiving federal Lifeline Support	(6)	<u>68</u>	x	\$ <u>1.75</u>	=	\$ <u>119.00</u>
Tier 3 Low-Income Subscribers receiving federal Lifeline Support	(7)		x	\$ _____	=	\$ _____
Tier 4 Low-Income Subscribers receiving federal Lifeline Support	(8)		x	\$ _____	=	\$ _____

Check box to the right if partials or pro rata amounts are used. Indicate dollar amount, if applicable, on line 9.  \$ (14.02) (9)

NOTE: (Do not include partials or pro rata amounts on lines 5 - 8 above)

Total federal Lifeline support claimed (Sum of lines 5c, 6c, 7c, 8c & 9) \$ 546.98 (10)

\* For multiple rates, use an average amount

Link Up		Non-Tribal (a)		Tribal (b)		Total Link Up (c)
Number of Connections waived	(11)	<u>0</u>				
Charges waived per Connection	(12) *	\$ _____	(\$30 max)	\$ _____	(\$100 max)	
Total Connection charges waived	(13)	\$ _____		\$ _____		
Deferred Interest	(14)	\$ _____		\$ _____		
Total Link Up dollars waived	(15)	\$ _____	+	\$ _____	=	\$ <u>0</u> (15c)

\* For multiple rates, use an average amount

Toll-Limitation Services (TLS)				Total TLS dollars claimed	
Incremental cost of providing TLS	(16)	\$ _____			
Number of subscribers for whom TLS initiated	(17)	_____			\$ <u>0</u> (18)

Presubscribed Interexchange Carrier Charge (PICC)		(For Price-cap companies only; prior to 7/1/2000)			
Monthly charge per line	(19)	\$ _____		Total PICC dollars waived	\$ <u>0</u> (21)
Number of Subscribers per month	(20)	_____			

ETC Payment (2.2)					
Total Lifeline \$	<u>546.98</u>	Total TLS \$	<u>0</u>		
Total Link Up \$	<u>0</u>	Total PICC \$	<u>0</u>		
		Total Dollars	\$ <u>546.98</u>		

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USAC Service Provider Identification Number (1) 143002209 Serving Area (2) 381622

(3)		(4)	
Company Name:	<u>Moore &amp; Liberty Telephone Company</u>	a) Submission Date	<u>07/15/08</u>
Mailing Address:	<u>301 Dewey St</u> <u>PO Box 66</u> <u>Enderlin, ND 58027</u>	b) Data Month	<u>June-08</u>
Contact Name:	<u>Shelle Bunn</u>	c) Type of filing (Check one):	Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>
Telephone Number:	<u>701-437-3300</u>	d) State Reporting	<u>North Dakota</u>
Fax Number:	<u>701-437-3022</u>		
E-mail Address:	<u>sbunn@mlqc.com</u>		

Lifeline		# Lifeline Subscribers (a)		Lifeline Support/ Subscriber (b)*	=	Total Lifeline Support (c)
Tier 1 Low-Income Subscribers receiving federal Lifeline Support	(5)	<u>69</u>	x	\$ <u>6.50</u>	=	\$ <u>448.50</u>
Tier 2 Low-Income Subscribers receiving federal Lifeline Support	(6)	<u>69</u>	x	\$ <u>1.75</u>	=	\$ <u>120.75</u>
Tier 3 Low-Income Subscribers receiving federal Lifeline Support	(7)		x	\$ _____	=	\$ _____
Tier 4 Low-Income Subscribers receiving federal Lifeline Support	(8)		x	\$ _____	=	\$ _____

Check box to the right if partials or pro rata amounts are used. Indicate dollar amount, if applicable, on line 9.  \$ 14.02 (9)

NOTE: (Do not include partials or pro rata amounts on lines 5 - 8 above)

Total federal Lifeline support claimed (Sum of lines 5c, 6c, 7c, 8c & 9) \$ 583.27 (10)

\* For multiple rates, use an average amount

Link Up		Non-Tribal (a)		Tribal (b)		Total Link Up (c)
Number of Connections waived	(11)	<u>0</u>				
Charges waived per Connection	(12) *	\$ _____	(\$30 max)	\$ _____	(\$100 max)	
Total Connection charges waived	(13)	\$ _____		\$ _____		
Deferred Interest	(14)	\$ _____		\$ _____		
Total Link Up dollars waived	(15)	\$ _____	+	\$ _____	=	\$ <u>0</u> (15c)

\* For multiple rates, use an average amount

Toll-Limitation Services (TLS)				
Incremental cost of providing TLS	(16)	\$ _____		
Number of subscribers for whom TLS Initiated	(17)	_____	Total TLS dollars claimed	\$ <u>0</u> (18)

Presubscribed Interexchange Carrier Charge (PICC) (For Price-cap companies only; prior to 7/1/2000)				
Monthly charge per line	(19)	\$ _____		
Number of Subscribers per month	(20)	_____	Total PICC dollars waived	\$ <u>0</u> (21)

ETC Payment (22)				
Total Lifeline \$	<u>583.27</u>	Total TLS \$	<u>0</u>	
Total Link Up \$	<u>0</u>	Total PICC \$	<u>0</u>	
<b>Total Dollars</b>		<b>\$</b>	<u>583.27</u>	

If you have any questions, please call USAC at (973) 884-8027 or (973) 884-8553