

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) 143002536 Serving Area (2) 382247

<p>(3)</p> <p>Company Name: NEMONT TELEPHONE COOP., INC.</p> <p>Mailing Address: PO BOX 600 SCOBEY, MT. 59263</p> <p>Contact Name: ROGER DEL FIACCO, ACCTG.FINANCE.COST & REGULATORY</p> <p>Telephone Number: (406) 783-2200</p> <p>Fax Number: (406) 783-5639</p> <p>E-mail Address: _____</p>	<p>(4)</p> <p>a) Submission Date <u>September 25, 2008</u></p> <p>b) Data Month <u>SEPTEMBER</u></p> <p>c) Type of filing (Check one): Original <input checked="" type="checkbox"/></p> <p>d) State Reporting <u>NORTH DAKOTA</u></p>
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Lifeline	# Lifeline Subscribers	Lifeline Support/ Subscriber	Total Lifeline Support
	(a)	(b)*	(c)
Tier 1 Low-Income Subscribers receiving federal Lifeline Support (5)	4	x \$ 6.50	= \$ 26
Tier 2 Low-Income Subscribers receiving federal Lifeline Support (6)	4	x \$ 1.75	= \$ 7
Tier 3 Low-Income Subscribers receiving federal Lifeline Support (7)	4	x \$ 1.75	= \$ 7
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. * \$ 0 (9)

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

Total federal Lifeline support claimed \$ 40 (10)
(Sum of lines 5c, 6c, 7c, 8c & 9)

Link Up	Non-Tribal (a)	Tribal (b)	Total Link Up (c)
Number of Connections waived (11)	_____	_____	_____
Charges waived per Connection (12) *	12.75 (\$30 max)	\$ _____ (\$100 max)	_____
Total Connection charges waived (13)	0.00	\$ _____	_____
Deferred Interest (14)	\$ _____	\$ _____	_____
Total Link Up dollars waived (15)	_____	+ 0	= \$ 0.00 (15c)

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

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

ETC Payment (22)			
Total Lifeline \$	<u>40.00</u>	Total TLS \$	<u>0</u>
Total Link Up \$	<u>0.00</u>	Total PICC \$	<u>0</u>
		Total Dollars \$	<u>40.00</u>

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