



Moore & Liberty Telephone Company

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— FAX COVER SHEET —

To: ND PSC

From: Shelie Bunn

Fax: 701-328-2410

Pages: 4

Re: 3rd Qtr 2008 Form 497

Date: 7/15/2008

Comments:

139 PU-08-1 Filed: 10/21/2008 Pages: 4
 July, August, September 2008 Filings

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

(3)		(4)	
Company Name:	<u>Moore & Liberty Telephone Company</u>	a) Submission Date	<u>10/21/08</u>
Mailing Address:	<u>301 Dewey St</u>	b) Data Month	<u>July-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>Shelie Bunn</u>		
Telephone Number:	<u>701-437-3300</u>		
Fax Number:	<u>701-437-3022</u>		
E-mail Address:	<u>sbunn@mllgc.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>67</u>	x	\$ <u>6.50</u>	=	\$ <u>435.50</u>
Tier 2 Low-income Subscribers receiving federal Lifeline Support	(6) <u>67</u>	x	\$ <u>1.75</u>	=	\$ <u>117.25</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. \$ (11.83) (9)
NOTE: (Do not include partials or pro rata amounts on lines 5 - 8 above)

Total federal Lifeline support claimed \$ 540.92 (10)
(Sum of lines 5c, 6c, 7c, 8c & 9)

* 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)* \$ <u>12.50</u> (\$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>540.92</u>	Total TLS \$	<u>0</u>
Total Link Up \$	<u>-</u>	Total PICC \$	<u>0</u>
Total Dollars		\$	<u>540.92</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

Approved by OMB
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 & Liberty Telephone Company</u>	a) Submission Date	<u>10/21/08</u>
Mailing Address:	<u>301 Dewey St</u> <u>PO Box 66</u> <u>Enderlin, ND 58027</u>	b) Data Month	<u>August-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>65</u>	x	\$ <u>6.50</u>	=	\$ <u>422.50</u>
Tier 2 Low-Income Subscribers receiving federal Lifeline Support	(6) <u>65</u>	x	\$ <u>1.75</u>	=	\$ <u>113.75</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. \$ (17.59) (9)
NOTE: (Do not include partials or pro rata amounts on lines 5 - 8 above)

Total federal Lifeline support claimed \$ 518.66 (10)
(Sum of lines 5c, 6c, 7c, 8c & 9)

* 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)* \$ <u>12.50</u> (\$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) \$ _____	\$ <u>0</u> (18)
Number of subscribers for whom TLS initiated	(17) _____	

Presubscribed Interexchange Carrier Charge (PICC)		Total PICC dollars waived
Monthly charge per line	(19) \$ _____	\$ <u>0</u> (21)
Number of Subscribers per month	(20) _____	

ETC Payment (22)	
Total Lifeline \$ <u>518.66</u>	Total TLS \$ <u>0</u>
Total Link Up \$ <u>-</u>	Total PICC \$ <u>0</u>
Total Dollars \$ <u>518.66</u>	

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

FCC 497
October 2000

LIFELINE AND LINK UP WORKSHEET

Approved by OMB
3080-0819
Avg. Burden Est. per Respondent: 3.0 Hrs.

USAC Service Provider Identification Number (1) 143002209

Serving Area (2) 381822

(3)		(4)	
Company Name:	<u>Moore & Liberty Telephone Company</u>	a) Submission Date	<u>10/21/08</u>
Mailing Address:	<u>301 Deway St</u>	b) Data Month	<u>September-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>67</u>	x \$ <u>6.50</u>	= \$ <u>435.50</u>
Tier 2 Low-Income Subscribers receiving federal Lifeline Support (6)	<u>67</u>	x \$ <u>1.75</u>	= \$ <u>117.25</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. <input checked="" type="checkbox"/>			\$ <u>6.05</u> (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) \$ <u>558.80</u> (10)

Link Up	Non-Tribal (a)	Tribal (b)	Total Link Up (c)
Number of Connections waived (11)	<u>1</u>		
Charges waived per Connection (12)*	\$ <u>12.50</u> (\$30 max)	\$ _____ (\$100 max)	
Total Connection charges waived (13)	\$ <u>12.50</u>	\$ _____	
Deferred Interest (14)	\$ _____	\$ _____	
Total Link Up dollars waived (15)	\$ <u>12.50</u>	\$ _____	= \$ <u>12.50</u> (15c)

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

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

ETC Payment (22)			
Total Lifeline \$	<u>558.80</u>	Total TLS \$	<u>0</u>
Total Link Up \$	<u>12.50</u>	Total PICC \$	<u>0</u>
Total Dollars		\$ <u>571.30</u>	

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