

FCC Form 497  
July 2008 Edition

**LIFELINE AND LINK UP WORKSHEET**

Approved by OMB  
3080-0819

Avg. Burden Est. per Respondent: 3.0 Hrs.

USAC Service Provider Identification Number (1) 143002536

Serving Area (2) 382247

|   |   |
|---|---|
| <p>(3)</p> <p><b>Company Name:</b> <u>NEMONT TELEPHONE COOPERATIVE, INC.</u></p> <p><b>Mailing Address:</b> <u>PO BOX 600</u><br/><u>SCOBEE, MT 59263-600</u></p> <p><b>Contact Name:</b> <u>AIMEE DIETRICH, CONTROLLER</u></p> <p><b>Telephone Number:</b> <u>(406) 783-2200</u></p> <p><b>Fax Number:</b> <u>(406) 783-5639</u></p> <p><b>E-mail Address:</b> _____</p> | <p>(4)</p> <p>a) Submission Date <u>April 28, 2011</u></p> <p>b) Data Month <u>APRIL</u></p> <p>c) Type of filing (Check one): Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/></p> <p>d) State Reporting <u>NORTH DAKOTA</u></p> |
|---|---|

| Lifeline   | # Lifeline<br>Subscribers<br>(a) | Lifeline Support/<br>Subscriber<br>(b)* | Total Lifeline<br>Support<br>(c) |
|--|----------------------------------|---|----------------------------------|
| Tier 1 Low-Income Subscribers receiving federal Lifeline Support (5) | 4                                | \$ 6.50                                 | \$ 26                            |
| Tier 2 Low-Income Subscribers receiving federal Lifeline Support (6) | 4                                | \$ 1.75                                 | \$ 7                             |
| Tier 3 Low-Income Subscribers receiving federal Lifeline Support (7) | 4                                | \$ 1.75                                 | \$ 7                             |
| Tier 4 Low-Income Subscribers receiving federal Lifeline Support (8) | 4                                | \$ 0                                    | \$ 0                             |

Check box to the right if partials or pro rata amounts are used. Indicate dollar amount, if applicable, on line 9.   \$ \_\_\_\_\_ (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) \$ 40 (10)

\* For multiple rates, use an average amount

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

\* For multiple rates, use an average amount

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

|                             |                       |
|-----------------------------|-----------------------|
| <b>ETC Payment (19)</b>     |                       |
| Total Lifeline \$ <u>40</u> | Total TLS \$ <u>0</u> |
| Total Link Up \$ <u>0</u>   |                       |
| Total Dollars \$ <u>40</u>  |                       |

If you have any questions, please call USAC at (866) 873(USF)-4727 Toll Free