



Tax Rating Services
Telecom & Sales Tax Services
Corporate Income Tax Services
FCC & State Regulatory Services



October 11, 2013

North Dakota Public Service Commission
Executive Secretary, Darrell Nitschke
600 E. Boulevard, Dept. 408
Bismarck, ND 58505-0480

RE: Telrite Corporation d/b/a LIFE WIRELESS filing a copy of – Lifeline Certification on FCC Form 481 – Carrier Annual Reporting Data Collection Form

Dear Chief Clerk,

Pursuant to FCC requirements under 47 C.F.R. § 54.422, enclosed please find for filing a copy of Telrite Corporation d/b/a enTouch Wireless' FCC Form 481 – Carrier Annual Reporting Data Collection Form.

An extra copy of this letter is enclosed to be date-stamped and returned to us in the self- addressed, postage-paid envelope.

If you have any questions regarding this filing, please contact me at (407) 260-1011 or regulatory@csilongwood.com.

Respectfully submitted,

Mark Lammert
Attorney-in-Fact
Telrite Corporation d/b/a LIFE WIRELESS

Enclosures

FCC Form 481 - Carrier Annual Reporting Data Collection Form	FCC Form 481 OMB 3060-0986 OMB 3060-0819 Avg. Burden Estimate per Respondent: 20 Hours
-------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------

<010> Study Area Code	389017
<015> Study Area Name	Telrite Corporation
<020> Program Year	2014
<030> Contact Name: Person USAC should contact with questions about this data	Mark Lammert
<035> Contact Telephone Number: Number of the person identified in data line <030>	407-260-1011
<039> Contact Email: Email of the person identified in data line <030>	regulatory@csilongwood.com

ANNUAL REPORTING FOR ALL CARRIERS	54,313 Completion Required	54,422 Completion Required
<100> Service Quality Improvement Reporting <i>(complete attached worksheet)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<200> Outage Reporting (voice) <i>(complete attached worksheet)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<210> <input checked="" type="checkbox"/> <-- check box if no outages to report		
<300> Unfulfilled Service Requests (voice)	<input type="checkbox"/>	<input type="checkbox"/>
<310> Detail on Attempts (voice)	<input type="checkbox"/>	<input type="checkbox"/>
<320> Unfulfilled Service Requests (broadband)	<input type="checkbox"/>	<input type="checkbox"/>
<330> Detail on Attempts (broadband)	<input type="checkbox"/>	<input type="checkbox"/>
<400> Number of Complaints per 1,000 customers (voice)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<410> Fixed <input type="text" value="0"/>		
<420> Mobile <input type="text" value="0"/>		
<440> Number of Complaints per 1,000 customers (broadband)	<input type="checkbox"/>	<input type="checkbox"/>
<450> Fixed <input type="text"/>		
<450> Mobile <input type="text"/>		
<500> Service Quality Standards & Consumer Protection Rules Compliance <i>(check to indicate certification)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<510> <i>(attached descriptive document)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations <i>(check to indicate certification)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<610> <i>(attached descriptive document)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice) <i>(complete attached worksheet)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<710> Company Price Offerings (broadband) <i>(complete attached worksheet)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<800> Operating Companies and Affiliates <i>(complete attached worksheet)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)? <i>(if yes, complete attached worksheet)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<1000> Voice Services Rate Comparability <i>(check to indicate certification)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<1010> <i>(attach descriptive document)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<1100> Terrestrial Backhaul (Y/N)? <i>(if not, check to indicate certification)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<1110> <i>(complete attached worksheet)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<1200> Terms and Condition for Lifeline Customers <i>(complete attached worksheet)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers:

<2000>	<input type="checkbox"/>	<input type="checkbox"/>
<2005>	<input type="checkbox"/>	<input type="checkbox"/>

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>	<input type="checkbox"/>	<input type="checkbox"/>
<3005>	<input type="checkbox"/>	<input type="checkbox"/>

**(100) Service Quality Improvement Reporting
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986
OMB Control No. 3060-0819
July 2013

<010> Study Area Code	389017
<015> Study Area Name	Telrite Corporation
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Mark Lammert
<035> Contact Telephone Number - Number of person identified in data line <030>	407-260-1011
<039> Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com

<110> Has your company received its ETC certification from the FCC?	(yes / no)
<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)

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 required to address voice telephony service

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 of Attached Document (.pdf)

- <113> Maps detailing progress towards meeting plan targets
- <114> Report how much universal service (USF) support was received
- <115> How (USF) was used to improve service quality
- <116> How (USF) was used to improve service coverage
- <117> How (USF) was used to improve service capacity
- <118> Provide an explanation of network improvement targets not met in the prior calendar year.

**(900) Tribal Lands Reporting
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986
OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	389017
<015>	Study Area Name	Telrite Corporation
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert
<035>	Contact Telephone Number - Number of person identified in data line <030>	407-260-1011
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com

<910> Tribal Land(s) on which ETC Serves _____

<920> Tribal Government Engagement Obligation _____
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:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions;
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select (Yes, No, NA)

**(1110) No Terrestrial Backhaul Reporting
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986
OMB Control No. 3060-0819
July 2013

<010> Study Area Code	389017
<015> Study Area Name	Telrite Corporation
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Mark Lammert
<035> Contact Telephone Number - Number of person identified in data line <030>	407-260-1011
<039> Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)

(1200) Terms and Condition for Lifeline Customers Lifeline Data Collection Form	FCC Form 481
	OMB Control No. 3060-0986
	OMB Control No. 3060-0819
	July 2013

<010> Study Area Code	389017
<015> Study Area Name	Telrite Corporation
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Mark Lammert
<035> Contact Telephone Number - Number of person identified in data line <030>	407-260-1011
<039> Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of attached document (.pdf)

<1220> Link to Public Website

HTTP www.lifewireless.com

Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

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

<1222> Details on the number of minutes provided as part of the plan,

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

(2000) Price Cap Carrier Additional Documentation Data Collection Form <i>Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers</i>	FCC Form 481 OMB Control No. 3060-0986 OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	
<015> Study Area Name	389017
<020> Program Year	Telrite Corporation
<030> Contact Name - Person USAC should contact regarding this data	2014
<035> Contact Telephone Number - Number of person identified in data line <030>	Mark Lammert
<039> Contact Email Address - Email Address of person identified in data line <030>	407-260-1011 regulatory@csilongwood.c

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting		
<2010>	2nd Year Certification {47 CFR § 54.313(b)(1)}	<input type="checkbox"/>
<2011>	3rd Year Certification {47 CFR § 54.313(b)(2)}	<input type="checkbox"/>
Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)}		
<2012>	2013 Frozen Support Certification	<input type="checkbox"/>
<2013>	2014 Frozen Support Certification	<input type="checkbox"/>
<2014>	2015 Frozen Support Certification	<input type="checkbox"/>
<2015>	2016 and future Frozen Support Certification	<input type="checkbox"/>
Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}		
<2016>	Certification Support Used to Build Broadband	<input type="checkbox"/>
Connect America Phase II Reporting {47 CFR § 54.313(e)}		
<2017>	3rd year Broadband Service Certification	<input type="checkbox"/>
<2018>	5th year Broadband Service Certification	<input type="checkbox"/>
<2019>	Interim Progress Certification	<input type="checkbox"/>
<2020>	Please check the box to confirm that the attached PDF, on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	<input type="checkbox"/>
<2021>	Interim Progress Community Anchor Institutions	<input type="checkbox"/>
Name of Attached Document Listing Required Information		

(3000) Rate Of Return Carrier Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986 OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	389017
<015> Study Area Name	Telrite Corporation
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Mark Lammert
<035> Contact Telephone Number - Number of person identified in data line <030>	407-260-1011
<039> Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilonywood.com

CHECK the boxes below to note compliance on its five year service quality plan [pursuant to 47 CFR § 54.202(a)] and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

Progress Report on 5 Year Plan

(3010) Milestone Certification (47 CFR § 54.313(f)(1)(i)) (3011) Please check this box to confirm that the attached PDF, on line 3012, contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information _____ <input type="checkbox"/>	
(3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)) (3013) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) (3014) If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:	Name of Attached Document Listing Required Information _____ <input type="checkbox"/> [Yes/No] <input type="checkbox"/> [Yes/No]	
(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) (3016) PDF of Balance Sheet, Income Statement and Statement of Cash Flows	_____ <input type="checkbox"/> <input type="checkbox"/>	
(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation (3018) If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	Name of Attached Document Listing Required Information _____ <input type="checkbox"/> [Yes/No]	
(3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications (3020) PDF of Balance Sheet, Income Statement and Statement of Cash Flows	_____ <input type="checkbox"/> <input type="checkbox"/>	
(3021) Management letter issued by the independent certified 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 3025 pursuant to § 54.313(f)(2), contains:	_____ <input type="checkbox"/> <input type="checkbox"/>	
(3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,	_____ <input type="checkbox"/>	
(3023) Underlying information subjected to a review by an independent certified public accountant (3024) Underlying information subjected to an officer certification.	_____ <input type="checkbox"/> <input type="checkbox"/>	
(3025) PDF of Balance Sheet, Income Statement and Statement of Cash Flows (3026) Attach the worksheet listing required information	_____ <input type="checkbox"/> <input type="checkbox"/> Name of Attached Document Listing Required Information _____	

Certification - Reporting Carrier Data Collection Form	PCC Form 481
	OMB Control No. 3060-0986
	OMB Control No. 3060-0819
	July 2013

<010> Study Area Code	389017
<015> Study Area Name	Telrite Corporation
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Mark Lammert
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<039> Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com

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

<p>I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.</p>	
<p>Name of Reporting Carrier: Telrite Corporation</p>	
<p>Signature of Authorized Officer: <i>Kelley Jesel</i></p>	<p>Date: 10.4.2013</p>
<p>Printed name of Authorized Officer: Kelley Jesel</p>	
<p>Title or position of Authorized Officer: CFO</p>	
<p>Telephone number of Authorized Officer: 678-202-1294</p>	
<p>Study Area Code of Reporting Carrier: 389017</p>	<p>Filing Due Date for this form: 10/15/2013</p>
<p>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p>	

Certification - Agent / Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986 OMB Control No. 3060-0819 July 2013
<010> Study Area Code		389017
<015> Study Area Name		Telrite Corporation
<020> Program Year		2014
<030> Contact Name - Person USAC should contact regarding this data		Mark Lammert
<035> Contact Telephone Number - Number of person identified in data line <030>		407-260-1011
<039> Contact Email Address - Email Address of person identified in data line <030>		regulatory@csilongwood.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent: _____	
Name of Reporting Carrier: _____	
Signature of Authorized Officer: _____	Date: _____
Printed name of Authorized Officer: _____	
Title or position of Authorized Officer: _____	
Telephone number of Authorized Officer: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier: _____	
Name of Authorized Agent or Employee of Agent: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Printed name of Authorized Agent or Employee of Agent: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments



FCC Form 481

Section 500 – Service Quality Standards & Consumer Protection Rules Compliance

Under FCC Rules, Section 54.202, an ETC must comply that it will satisfy applicable consumer protection and service quality standards. Telrite Corporation d/b/a Life Wireless (Telrite) is in compliance with the Cellular Telecommunications and Internet Association's Consumer Code for Wireless Service.

1. Telrite discloses rates and terms of service to customers at the time service is initiated. These same terms and conditions are posted on Telrite's website at www.lifewireless.com.
2. Telrite provides service availability information on their website at www.lifewireless.com.
3. Telrite provides contract terms to subscribers when they initiate or change service. These same terms are provided to subscribers during the annual recertification process as outlined in Commission rules that govern continued subscriber eligibility.
4. Telrite's Lifeline service can be terminated at any time by either party without an early termination fee. Service is dependent on continued usage and eligibility in the program.
5. Telrite provides disclosures, minutes included in Lifeline plans, expiration of rollover minutes, availability of service, and cost for additional minutes in published Lifeline advertising materials.
6. Telrite customers are provided options if they exceed the number of minutes provided in their Lifeline plan. If at any time a customer purchases additional minutes, charges and plan options are available on the company website at www.lifewireless.com.
7. Telrite's toll-free customer service number is 888-543-3620. Customers may also dial 611 from their Life Wireless handset to reach customer service free of charge or by contacting Telrite via email at info@lifewireless.com. This information is provided in the terms of service and on the company website and in all information provided to subscribers.
8. Telrite responds to all consumer inquiries and complaints received from government agencies within 30 days.
9. Telrite has procedures in place to maintain the privacy of subscriber proprietary information in accordance with applicable federal and state laws.
10. Telrite has available to Lifeline customers an online portal where customers can check their balances and purchase additional minutes.



FCC Form 481

Section 600 - Functionality in Emergency Situations

Under FCC Rules, an ETC must demonstrate its ability to remain functional in emergency situations. Since Telrite Corporation d/b/a Life Wireless (Telrite) is providing service to its customers through the use of facilities obtained from other carriers, it is able to provide to its customers the same ability to remain functional in emergency situations as currently provided by the carriers to their own customers, including access to a reasonable amount of back-up power to ensure functionality without an external power source, re-routing traffic around damaged facilities, and the capability of managing traffic spikes resulting from emergency situations.

Telrite, along with their underlying carriers, have created back-up systems to ensure functionality in the event of a loss of power or network functionality. Telrite maintains its own diesel-powered backup generator at their switching facility in Georgia. All systems within the facility are implemented on redundant servers, each with redundant data network and power.