

**DOCKET NO. UM 1822**

**Cover Sheet for Submission of  
2017 Annual ETC Certification Reports**

Name of Eligible Telecommunications Carrier: Trans-Cascades Telephone Co.

Filing date: July 3, 2017

Is this: Original submission?  X  
OR  
Revised submission? \_\_\_\_\_

Person to contact for questions:

Name Summer McPherson

Phone number 503-630-8977

E-mail address mcphersons@cuaccess.net

Documents included in this filing (please check applicable items):

- \_\_\_\_\_ CAF/ICC Support (47 CFR § 54.304)
- \_\_\_\_\_ Rate Floor Data (47 CFR § 54.313(h))
- X Form 481 (High-cost per 47 CFR § 54.313, Low-income per 54.422)<sup>1</sup>
- \_\_\_\_\_ HUBB Portal Broadband Information<sup>2</sup>
- \_\_\_\_\_ Form 690 (Mobility Fund per 47 CFR § 54.1009)
- X Affidavit for High-Cost Support

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**Filing deadlines:** The Oregon deadlines for filing items required by 47 CFR § 54 are the same as the deadlines for filing with the FCC. The notarized affidavit for high-cost support must be filed no later than the due date for the FCC Form 481. Based on current information, it appears that all items other than CAF/ICC support data are due by July 3, 2017. The CAF/ICC support data is due on the same day as the ETC's interstate access tariff filing (see FCC DA 17-258 for dates).

<sup>1</sup> Lifeline-only ETCs must provide all information specified in 47 CFR § 54.422(b) even if the ETC does not submit this information to the FCC.

<sup>2</sup> Federal Price Cap carriers only.

AFFIDAVIT CERTIFYING USE OF UNIVERSAL SERVICE FUNDS

I, Brenda Crosby [name of company officer], being of lawful age and duly sworn, on my oath, state that I am the President [title] of Trans-Cascade Telephone Co. [Company name] and that I am authorized to execute this Affidavit on behalf of the Company, and the facts set forth in this Affidavit are true to the best of my knowledge, information and belief.

Pursuant to the requirements of the Federal Communications Commission, 47 C.F.R. § 54.314, Trans-Cascade Telephone Co. [Company name] hereby certifies to the Public Utility Commission of Oregon that it is eligible to receive federal high-cost support for the program years cited.

I attest that all federal high-cost support provided to Trans-Cascade Telephone Co. [Company name] in Oregon was used in the preceding calendar year (2016) and will be used in the coming calendar year (2018) only for the provision, maintenance and upgrading of facilities and services for which the support is intended.

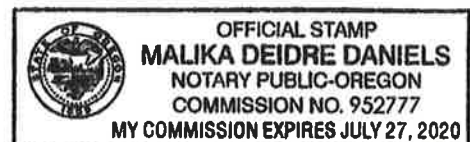
DATED this 8<sup>th</sup> day of June, 2017.

By: Brenda Crosby (Officer's Name)  
Its: President (Officer's Title)

SUBSCRIBED AND SWORN to before me this 8<sup>th</sup> day of June, 2017.

Malika Daniels

Notary public in and for the State of Oregon  
My Commission Expires: July 27th, 2020





Trans-Cascades Telephone Company

PO Box 189 Estacada, Oregon. 97023

Fax (503) 630-8934

Phone (503) 630-4202

June 22, 2017

Marlene H. Dortch, Secretary  
Federal Communications Commission  
Office of the Secretary  
445 Twelfth Street S.W.  
Room 5-A225  
Washington, D.C. 20554

**RE: FCC FORM 481 – CARRIER ANNUAL REPORTING DATA COLLECTION  
CONFIDENTIAL FINANCIAL INFORMATION - SUBJECT TO PROTECTIVE ORDER BEFORE  
THE FEDERAL COMMUNICATIONS COMMISSION (FILED IN DOCKET 14-58) AND  
CONFIDENTIAL FINANCIAL INFORMATION FILED PURSUANT TO SECTIONS .457 AND .459  
OF THE FEDERAL COMMUNICATIONS COMMISSION RULES**

Dear Ms. Dortch,

Trans-Cascades Telephone Company, hereby submits the attached redacted and confidential versions of its “FCC Form 481 – Carrier Annual Reporting Data Collection” financial information pursuant to sections §54.313 and §54.422 of the Commission’s rules, as filed with the Universal Service Administrative Company.

Section 3005 of Form 481 requires the filing of financial information per 47 C.F.R. §54.313(f) (2). Trans-Cascades Telephone Company maintains that this information is “Confidential Financial Information” on the grounds that it is competitively sensitive information which could be used to disadvantage or harm XXX, and is submitting this information pursuant to Protective Order, DA 12-1857 as described below.

First, Trans-Cascades Telephone Company is submitting the 54.313(f)(2) “Confidential Financial Information” as a “Stamped Confidential Document” with each page bearing the legend CONFIDENTIAL FINANCIAL INFORMATION - SUBJECT TO PROTECTIVE ORDER BEFORE THE FEDERAL COMMUNICATIONS COMMISSION and also submitting the .457 and .459 “Confidential Financial Information” as a “Stamped Confidential Document” with each page labeled “CONFIDENTIAL FINANCIAL INFORMATION - SUBJECT TO PROTECTIVE ORDER BEFORE THE FEDERAL COMMUNICATIONS COMMISSION. One copy of the “Stamped Confidential Document(s)” and accompanying cover letter are enclosed.

Second, Trans-Cascades Telephone Company is submitting the “Stamped Confidential Document(s)” as a “Redacted Confidential Document” where the “Confidential Financial Information” has been redacted. One copy of the “Redacted Confidential Document(s)” and accompanying cover letter with each page labeled “REDACTED - FOR PUBLIC INSPECTION” are being filed through the Commission’s Electronic Comment Filing System (“ECFS”).

FCC Form 481 will also be filed with the State Commission.

If you have any questions, please contact me at [mcphersons@cuaccess.net](mailto:mcphersons@cuaccess.net) or (503)630-8977

Sincerely,  
Summer McPherson, Revenue Lead

<010>	Study Area Code	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2018
<030>	Contact Name: Person USAC should contact with questions about this data	Summer McPherson
<035>	Contact Telephone Number: Number of the person identified in data line <030>	5036308977 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	mcpersons@cuaccess.net
	Form Type	54.313 and 54.422





**(300) Unfulfilled Service Request  
Data Collection Form**

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

<010> Study Area Code

532378

<015> Study Area Name

TRANS--CASCADES TEL

<020> Program Year

2018

<030> Contact Name - Person USAC should contact regarding this data

Summer McPherson

<035> Contact Telephone Number - Number of person identified in data line <030>

5036308977 ext.

<039> Contact Email Address - Email Address of person identified in data line <030>

mcphersons@cuaccess.net

<300> Unfulfilled service request (voice)

0

<310> Detail on attempts (voice)

\_\_\_\_\_

Name of Attached Document

<320> Unfulfilled service request (broadband)

0

<330> Detail on attempts (broadband)

\_\_\_\_\_

Name of Attached Document

(400) Number of Complaints per 1,000 customers  
Data Collection Form

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

<010>	Study Area Code	532378	
<015>	Study Area Name	TRANS-CADCAOBS TEL	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Summer McEneaney	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5126389977 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcphearsom@cusaccess.net	
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	Offered only fixed voice	
<410>	Complaints per 1000 customers for fixed voice	0.0	
<420>	Complaints per 1000 customers for mobile voice		
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	Offered only fixed broadband	
<440>	Complaints per 1000 customers for fixed broadband	0.0	
<450>	Complaints per 1000 customers for mobile broadband		

**(500) Compliance With Service Quality Standards and Consumer Protection Rules  
Data Collection Form**

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

<010>	Study Area Code	532378
<015>	Study Area Name	TRANS-CASCADE TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	563630877 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpheerso@usaaccess.net
<500>	Certify compliance with applicable service quality standards and consumer protection rules	Yes
		532378or510.pdf
<510>	Descriptive document for Service Quality Standards & Consumer Protection Rules Compliance	
<515>	Certify compliance with applicable minimum service standards	



**(600) Functionality in Emergency Situations  
Data Collection Form**FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010>	Study Area Code	532378
<015>	Study Area Name	TRANS-ORCAIRRF. TAG
<020>	Program Year	2013
<030>	Contact Name - Person USAC should contact regarding this data	Suzanne McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpersona@ouacomm.net
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	532378or610.pdf











**(1000) Voice and Broadband Service Rate Comparability  
Data Collection Form**

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

<010>	Study Area Code	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpheersons@cuaccess.net

<1000>	Voice services rate comparability certification	Yes	
<1010>	Attach detailed description for voice services rate comparability compliance		532378or1010.pdf
<1020>	Broadband comparability certification		<p style="text-align: center;">Name of Attached Document</p> <hr/> <p>Yes - Pricing is no more than the most recent applicable benchmark announced by the Wireline Competition Bureau</p>
<1030>	Attach detailed description for broadband comparability compliance		532378or1030.pdf
			<p style="text-align: center;">Name of Attached Document</p> <hr/>

**(1100) 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	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

<1100> Certify whether terrestrial backhaul options exist (Y/N)

<1130> Please select the appropriate response (Yes, No, Not Applicable) 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 532378  
 <015> Study Area Name TRANS-CASCADES TEL  
 <020> Program Year 2018  
 <030> Contact Name - Person USAC should contact regarding this data Sumner McPherson  
 <035> Contact Telephone Number - Number of person identified in data line <030> 5036308977 ext.  
 <039> Contact Email Address - Email Address of person identified in data line <030> mcpersons@cuaccess.net



Name of Attached Document

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

<1220> Link to Public Website HTTP

"Please check these boxes below to confirm that the attached document(s), 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.



**(2005) Price Cap Carrier Additional Documentation**  
**Data Collection Form**  
*Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers*

<010>	Study Area Code	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcphe@sonia@cuaccess.net

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental 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**

<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.	
<2022>	Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.	
<2023>	The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.	
<2024A>	Round 2 Recipient of Incremental Support?	
<2024B>	Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information
<2025A>	Round 2 Recipient of Incremental Support?	
<2025B>	Attach geocoded information for Phase I milestone reports (Round 2 for year three) - Connect America Fund, WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).	Name of Attached Document Listing Required Information
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)	

(2005) Price Cap Carrier Additional Documentation

Data Collection Form

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

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

**Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}**

<2016> Certification support used to build broadband

**Connect America Phase II Reporting {47 CFR § 54.313(e)}**

<2017A> Connect America Fund Phase II recipient?

<2017C> Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.

<2018> Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)

Name of Attached Document Listing Required Information

<2019> Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)



<010>	Study Area Code	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure 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  
Carrier certifies to 54.313(f)(1)(iii)

(3010A) Certification of Public Interest Obligations (47 CFR § 54.313(f)(1)(i)) Yes - Attach Certification

(3010B) Please Provide Attachment Name of Attached Document Listing Required Information

(3012A) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)) No - No New Community Anchors

(3012B) Please Provide Attachment Name of Attached Document Listing Required Information

(3013) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) (Yes/No)

(3014) If yes, does your company file the RUS annual report (Yes/No)

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:

(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)

(3016) Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows

(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation Name of Attached Document Listing Required Information

(3018) If the response is no on line 3014, is your company audited? (Yes/No)

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:

(3019) Either a copy of their audited financial statement; or

(3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3021) Management letter and/or audit opinion 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 3026 pursuant to § 54.313(f)(2), contains:

(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

(3023) Underlying information subjected to a review by an independent certified public accountant

(3024) Underlying information subjected to an officer certification.

(3025) Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows

(3026) Attach the worksheet listing required information Name of Attached Document Listing Required Information

(3005) Rate Of Return Carrier Additional Documentation (Continued)

Data Collection Form

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

<010>	Study Area Code	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	maphersons@cuaccess.net

Financial Data Summary

- (3027) Revenue
- (3028) Operating Expenses
- (3029) Net Income
- (3030) Telephone Plant In Service(TPIS)
- (3031) Total Assets
- (3032) Total Debt
- (3033) Total Equity
- (3034) Dividends

# Redacted for Public View

Name of Attached Document Listing Required Information



<010>	Study Area Code	532378
<015>	Study Area Name	TRANS-CASCADE TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	5034388977 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcphecons@ouaccess.net

**4005 Rural Broadband Experiment**

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

**Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)**

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

**4001.** Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

**Community Anchor Institutions – FCC 14-98 (paragraph 79)**

**4003a.** RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

**4003b.** Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year. Name of Attached Document Listing Required Information \_\_\_\_\_

**Broadband Deployment Locations – FCC 14-98 (paragraph 80)**

**4004a.** Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481. Name of Attached Document Listing Required Information \_\_\_\_\_

**4004b.** Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the relevant geographic area. Name of Attached Document Listing Required Information \_\_\_\_\_

<b>Certification - Reporting Carrier Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	532378
<015> Study Area Name	TRANS-CASCADES TEL
<020> Program Year	2018
<030> Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035> Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

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

<b>Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients</b>	
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.	
Name of Reporting Carrier:	TRANS-CASCADES TEL
Signature of Authorized Officer:	CERTIFIED ONLINE <span style="float: right;">Date 06/21/2017</span>
Printed name of Authorized Officer:	Brooke Wheeler
Title or position of Authorized Officer:	CFO
Telephone number of Authorized Officer:	5036308952 ext.
Study Area Code of Reporting Carrier:	532378 <span style="float: right;">Filing Due Date for this form: 07/03/2017</span>
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



## Trans Cascades Telephone Company

PO Box 189 Estacada, Oregon. 97023

Fax (503) 630-8934

Phone (503) 630-4202

### Consumer Protection

**Trans Cascades Telephone Company** complies with the requirements of 47 CFR Part 64 Subpart U, Customer Proprietary Network Information and the Federal Trade Commission Red Flag rules to prevent identity theft. A manual for each of those programs is in place and is part of the employees' handbook. Employee training is conducted annually and new hires are instructed on the programs as required by their job functions.

### Service Quality Standards

#### Voice

**Trans Cascades Telephone Company** complies with the service standards of the State of Oregon as promulgated in the Oregon Administrative Rules **860-034-0390**, Retail Telecommunications Service Standards for Small Telecommunications Utilities.

#### Broadband

**Trans Cascades Telephone Company** complies with the service standards as noted in NECA Tariff #5 and is committed to provide the highest quality service to its broadband customers..





## Trans Cascades Telephone Company

PO Box 189 Estacada, Oregon. 97023  
Fax (503) 630-8934  
Phone (503) 630-4202

Trans-Cascades Telephone Company is able to remain functional in an emergency situation. Please see the specific information below in regard to back-up power, ability to reroute traffic around damaged facilities, and the capability to manage traffic spikes resulting from emergency situations.

### Back-up Poweer

**Trans-Cascades Telephone Company** has the following back-up power capabilities:

Switches – stand alone and/or host

Switch (Antelope) Onan 15KW, propane, 250 gallon tank, 3.5 days at max load.

Subscriber carrier (AdTran.)

Carrier Loc. Many remote Carrier locations which we use 5000 Watt portable generators, Gasoline, 5 gallon tank, 8 hours/tank

### Ability to reroute traffic around damaged facilities:

**Trans-Cascades Telephone Company** currently does not have redundant facilities to its connecting company toll tandem. There is redundancy built into the same route but do to how remote the Antelope area is, there are currently no other options for creating a redundant route. This is something we discuss annually and we will continue to look at future options. This facility interconnects to the Public Switched Telephone Network through its affiliate **Cascade Utilities, Inc.** This network will also handle broadband services to the assigned internet Service Provider.

### Capability to manage traffic spikes resulting from emergency situations

**Trans-Cascades Telephone Company** has 182 customers, switching capacity and transport capacity well exceed the total customers count. **Trans-Cascades Telephone Company** also serves 116 broadband customers for one ISP. **Trans-Cascades Telephone Company** takes no responsibility for the capabilities of interconnected networks to manage traffic spikes resulting from emergency situations, but will continue its best efforts for its networks during such events.













Trans Cascades Telephone Company

PO Box 189 Estacada, Oregon. 97023

Fax (503) 630-8934

Phone (503) 630-4202

532378or1010

## Trans-Cascades Telephone Company

### Voice Services Rate Comparability

As evidenced by the data provided in line 700 of this Form 481, Trans-Cascades Telephone Company voice service pricing is no more than 2 standard deviations above the national average urban rate (\$49.51) as announced by the Wireline Competition Bureau on February 14, 2017 (DA 17-167)



Trans Cascades Telephone Company

PO Box 189 Estacada, Oregon. 97023

Fax (503) 630-8934

Phone (503) 630-4202

532378or1030

## Trans-Cascades Telephone Company

### Broadband Services Rate Comparability

Trans-Cascades Telephone Company's Broadband Services pricing meets the FCC's broadband public interest obligations because it offers broadband service as shown on Line 710 of its Form 481 filing, at actual speeds of at least 10 Mbps downstream / 1 Mbps upstream at no more than the applicable benchmark for broadband services announced by the Bureau on February 14, 2017 (DA17-167).

### **54.313 Lifeline customers MOU and additional toll charges**

Lifeline subscribers receive the same residential service as a regular subscriber, but at a reduced monthly recurring rate. Thus, lifeline subscribers have an unlimited number of local calling minutes. As for toll, lifeline subscribers, similar to every Trans Cascades subscriber, are free to choose their own toll usage plans through IXCs that serve Trans Cascades.

## **Oregon Telephone Assistance Program (OTAP)/Lifeline Application**

Oregon Public Utility Commission  
PO Box 2148, Salem OR 97308  
1-800-848-4442 or 503-373-7171  
1-800-648-3458 (TTY)  
971-239-5845 (Videophone)  
Fax: 1-877-567-1977 or 503-378-6047  
[puc.rspf@state.or.us](mailto:puc.rspf@state.or.us)

You may qualify if you participate in one of the following programs:

Supplemental Nutrition Assistance Program; Food Stamps (SNAP)  
Supplemental Security Income (SSI)  
Temporary Assistance for Needy Families (TANF)  
National School Lunch Program; *Free Lunch Program Only* (NSLP)  
Certain State Medical Programs or Certain Medicaid Programs  
at or below 135% of the federal poverty guidelines

How to apply: To apply for this program or obtain more information, please contact the OTAP staff at 1-800-848-444. Or you may complete an application online at: [www.rspf.org](http://www.rspf.org)



# Oregon Telephone Assistance Program (OTAP)/Lifeline Application

You may complete an OTAP/Lifeline application online at: [www.rspf.org](http://www.rspf.org)

Oregon Public Utility Commission  
 PO Box 2148, Salem OR 97308  
 1-800-848-4442 or 503-373-7171  
 1-800-648-3458 (TTY)  
 971-239-5845 (Videophone)  
 Fax: 1-877-567-1977 or 503-378-6047  
[puc.rspf@state.or.us](mailto:puc.rspf@state.or.us)

Please **PRINT** clearly and **SIGN** on page 2.

*If you have a situation that prevents you from providing certain information, please contact us for assistance.*

Applicant's Legal Name (Last, First, M.I.) (Applicant's legal name <b>MUST</b> be on phone bill)		Applicant's Social Security No.	Applicant's Birth Date
		- -	/ /
Applicant's Home Address	Is this a temporary address? <input type="checkbox"/> Yes <input type="checkbox"/> No	Apt. #	City State OR ZIP
Applicant's Mailing Address (if different from your home address)		Apt. #	City State OR ZIP
Applicant's Phone Company (As listed on page 3)	Applicant's Phone Number ( ) -	Applicant's E-mail Address	

**I participate in the following qualifying programs (Check any that apply):**

- SNAP** (Supplemental Nutrition Assistance Program; Food Stamps)
- SSI** (Supplemental Security Income)
- TANF** (Temporary Assistance for Needy Families)
- Certain State Medical Programs or Certain Medicaid Programs** at or below 135% of the federal poverty guidelines

**Supporting documentation is required for the following program:**

- NSLP\*** (National School Lunch Program; *Free Lunch Program Only*)  
 \*Please provide a copy of the official letter from your school district indicating your current participation.

Please continue to page 2 



Please completely **READ** and **SIGN** this form that indicates you understand and agree to comply with the following Oregon Telephone Assistance Program (OTAP)/Lifeline rules:

- I understand that completing this application does not immediately approve me for the OTAP/Lifeline benefit. I will be notified in writing of my application status.
- I understand it may take 30-90 days for the phone company to apply the OTAP/Lifeline benefit to my phone bill.
- I give the Oregon Public Utility Commission (PUC) authority to obtain or review any required records needed to confirm my statements and to confirm that I qualify for the OTAP/Lifeline. I also authorize the phone company to release any required records for my OTAP/Lifeline benefit.
- I am head of household and no one else in my household receives landline or wireless OTAP/Lifeline service.
- I understand that the OTAP/Lifeline credit is only allowed for **ONE PHONE LINE PER HOUSEHOLD**
  - A household is defined as any persons who live together at the same address and share income and expenses.
- I understand that if I break or violate the one-per-household rule I will no longer qualify for the OTAP/Lifeline program.
- I agree to let the PUC know within 30 days if:
  - I no longer qualify for the OTAP/Lifeline benefit
  - I no longer take part in a qualifying program
  - I receive more than one OTAP/Lifeline benefit
  - Another member of my household is also receiving the OTAP/Lifeline benefit
- I understand that I have 30 days to notify the PUC if I no longer qualify for the OTAP/Lifeline benefit or I may be removed from the program.
- I agree to notify the PUC of address changes within 30 days of moving.
- I understand that my OTAP/Lifeline benefit may not be transferred or given to any other person.
- I understand that I may be required to confirm that I still qualify for the OTAP/Lifeline benefit at any time and that, if I do not comply, my OTAP/Lifeline benefits will stop.
- I understand that OTAP/Lifeline is a state and federal benefit and willfully making false statements or providing false or fraudulent documents to obtain the benefit is punishable by law and can result in fines, imprisonment, disqualification or being permanently removed from the program.

**By signing this application I certify under penalty of perjury that the information contained in this application is true and correct and that I meet the eligibility criteria for the OTAP/Lifeline benefit.**

Applicant Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

**Please Mail Application to: PUC, PO Box 2148, Salem OR 97308  
or Fax to: 1-877-567-1977 or 503-378-6047**

**Do you have questions? Call us at 1-800-848-4442 or 503-373-7171**



# Oregon Telephone Assistance Program (OTAP)/Lifeline Application

You may complete an OTAP/Lifeline application online at: [www.rspf.org](http://www.rspf.org)

Oregon Public Utility Commission  
 PO Box 2148, Salem OR 97308  
 1-800-848-4442 or 503-373-7171  
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 Fax: 1-877-567-1977 or 503-378-6047  
[puc.rspf@state.or.us](mailto:puc.rspf@state.or.us)

The Oregon Public Utility Commission (PUC) manages the Oregon Telephone Assistance Program (OTAP), also known as Lifeline. If you qualify, this federal and state government assistance program reduces your monthly phone bill by \$12.75.

**You may qualify if you participate in one of the following programs:**

- Supplemental Nutrition Assistance Program; Food Stamps (SNAP)
- Supplemental Security Income (SSI)
- Temporary Assistance for Needy Families (TANF)
- National School Lunch Program; *Free Lunch Program Only* (NSLP)
- Certain State Medical Programs or Certain Medicaid Programs at or below 135% of the federal poverty guidelines

### Landline phone companies that provide the OTAP/Lifeline benefit:

Asotin	Frontier	Nehalem	Roome Tel Com
Beaver Creek	Gervais	North State	Scio Mutual
Canby Co-Op	Helix	Oregon Tel. Corp.	St. Paul
CenturyLink	Home/TDS	Oregon/Idaho	Stayton Co.
Clear Creek	Molalla	People's	Warm Springs
Colton	Monitor	Pine Phone Co.	
ComSpan	Monroe	Pioneer	
Eagle	Mt. Angel	Reliance Connects	

### Wireless phone companies that provide the OTAP/Lifeline benefit:

AT&T Mobility\* -in select areas      Cricket      Snake River PCS      US Cellular

**The OTAP/Lifeline benefit cannot be applied to Pay-As-You-Go Plans.**

\*AT&T Mobility only offers the OTAP/Lifeline benefit in select areas.  
 Call 1-800-377-9450 to determine if the OTAP/Lifeline benefit is offered in your coverage area.



June 19, 2017

Ms. Marlene H. Dortch  
Secretary  
Federal Communications Commission  
9300 East Hampton Drive  
Capitol Heights, MD 20743

Re: WC Docket No. 14-58, 2015 Annual Report, Form 481 for High-Cost Recipient  
54.313(f)(1) "Public Interest Obligation"

Dear Ms. Dortch:

In compliance with the filing requirements associated with, and attached to Form 481, we wish to advise the Commission that Trans-Cascades Telephone Company d/b/a Reliance Connects provides High Speed Internet service to its customers and:

- Has taken reasonable steps to provide upon reasonable request broadband service at actual speeds of 10 Mbps downstream / 1 Mbps upstream;
- Provides latency suitable for real-time applications including VoIP and usage capacity which is reasonably comparable to those in urban areas and;
- That reasonable requests for service are met within a reasonable timeframe.

If there are questions, I may be contacted at 503-630-8940

Sincerely,

Brenda Crosby  
President

PO Box 189  
Estacada, OR 97023

Phone: 503.630.4202  
Fax: 503.630.8934



According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is xxx. The time required to complete this information collection is estimated to average x hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

<i>USDA-RUS</i>		This data will be used by RUS to review your financial situation. Your response is required by 7 U.S.C. 901 et seq. and, subject to federal laws and regulations regarding confidential information, will be treated as confidential.	
<b>FINANCIAL AND STATISTICAL REPORT FOR BROADBAND BORROWERS</b>		BORROWER NAME	
		TRANS-CASCADES TELEPHONE COMPANY	
		ADDRESS	
		ESTACADA, Oregon	
INSTRUCTIONS-Submit report to RUS within 15 days after close of the period.		PERIOD ENDING	BORROWER DESIGNATION
		December, 2016	OR1109

**CERTIFICATION**

We hereby certify that:

- the entries in this report are in accordance with the accounts and other records of the system and reflect the status of the system to the best of our knowledge and belief; and
- we have fulfilled our obligations under the Loan Documents throughout the year in all material respects

**ALL INSURANCE REQUIRED BY 7 CFR PART 1788, CHAPTER XVII, RUS, WAS IN FORCE DURING THE REPORTING PERIOD AND RENEWALS HAVE BEEN OBTAINED FOR ALL POLICIES.**

All of the obligations under the RUS loan documents have been fulfilled in all material respects.

There has been a default in the fulfillment of the obligations under the RUS loan documents. Said default(s) is/are specifically described in the notes section of this report.

Brenda Crosby 04/25/2017

DATE

**PART A. BALANCE SHEET**

<b>ASSETS</b>	
<b>CURRENT ASSETS</b>	
1. Cash and Equivalents	
2. Cash-RUS Construction Fund	
3. Accounts Receivable	
4. Notes Receivable	
5. Materials and Inventory	
6. Other Current Assets	
<b>Total Current</b>	
7. <b>Assets (1 thru 6)</b>	
<b>NONCURRENT ASSETS</b>	
8. <b>Investment in Affiliated Companies</b>	
9. Other Noncurrent Assets	
<b>PLANT, PROPERTY, AND EQUIPMENT</b>	
10. Telecom. Plant-in-Service	
11. Plant Under Construction	
12. Plant Adj., Nonop. Plant, & Goodwill	
13. Less Accumulated Depreciation	
<b>Net Plant</b>	
14. <b>(10 thru 12 less 13)</b>	
<b>TOTAL ASSETS</b>	
15. <b>(7+8+9+14)</b>	

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Total Equity = [



USDA-RUS  <b>FINANCIAL AND STATISTICAL REPORT FOR BROADBAND BORROWERS</b>	BORROWER DESIGNATION  OR1109  PERIOD ENDING  December, 2016
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**PART B. STATEMENTS OF INCOME AND RETAINED EARNINGS OR MARGINS**

ITEM
1. Local Network Services Revenues
a. Voice
b. Video
c. Internet
i. Broadband
ii. Other
2. Network Access Services and Long Distance Revenues
3. Miscellaneous Revenues
4. Other Operating Income
5. Uncollectible Revenues
<b>6. Net Operating Revenues (11 thru 4 less 5)</b>
7. Plant Specific Operations Expense
8. Plant Nonspecific Operations Expense <i>(Excluding Depreciation &amp; Amortization)</i>
9. Customer Operations Expense
10. Corporate Operations Expense
11. Other Operating Expenses
<b>12. Total Operating Expenses (7 thru 11)</b>
13. Operating Income or Margins (6 less 12)
14. Nonoperating/Nonregulated Net Income
<b>15. EBIDTA (13 + 14)</b>
16. Depreciation Expense
17. Amortization Expense
<b>18. EBIT (15 - 16 - 17)</b>
19. Interest on Funded Debt
20. Other Interest Expense
21. Taxes
a. Property
b. Income
<b>22. Total Net Income or Margins (18-19-20-21)</b>
23 Dividends Declared (Common)
24 Dividends Paid
25 Transfers to Patronage Capital
26 Principal Payments on Long Term Debt and Capital Leases
<b>27 TIER (19 + 20 + 22) / (19 + 20)</b>

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USDA-RUS  <b>FINANCIAL AND STATISTICAL REPORT FOR BROADBAND BORROWERS</b>	BORROWER DESIGNATION OR1109 <hr/> PERIOD ENDING December, 2016
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PART C. SERVICES						
No.	SERVICE OFFERINGS	1. RATES		2. SUBSCRIBERS		Total (c)
		Residential (a)	Business (b)	Residential (a)	Business (b)	
	Broadband Data Packages					
1				1		1
	Double Play - Voice/Broadband Data					
2	6m/1m	54.95	54.95	16	1	17
3	10m/1m	64.95	64.95	12	8	20
4	3m/1m	44.95	44.95	65	6	71
5	12m/1m	56.95	56.95	1	0	1

USDA-RUS  <b>FINANCIAL AND STATISTICAL REPORT FOR BROADBAND BORROWERS</b>				BORROWER DESIGNATION OR1109	
				PERIOD ENDING December, 2016	
<b>PART C. COMMUNITIES</b>					
No.	Community	County	State	No. Broadband Data Customers	Broadband Application
1	Antelope city	Wasco	OR	106	

USDA-RUS <b>FINANCIAL AND STATISTICAL REPORT          FOR BROADBAND BORROWERS</b>	BORROWER DESIGNATION OR1109 <hr/> PERIOD ENDING December, 2016
<b>PART D. STATEMENT OF CASH FLOWS</b>	

1.
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>
2. Net Income
<i>Adjustments to Reconcile Net Income to Net Cash Provided by Operating Act</i>
3. Add: Depreciation
4. Add: Amortization
5. Other (Explain)
<i>Changes in Operating Assets and Liabilities:</i>
6. Decrease/(Increase) in Accounts Receivable
7. Decrease/(Increase) in Materials and Inventory
8. Decrease/(Increase) in Other Current Assets
9. Increase/(Decrease) in Accounts Payable
10. Increase/(Decrease) in Other Current Liabilities
11.
<b>CASH FLOWS FROM FINANCING ACTIVITIES:</b>
12. Decrease/(Increase) in Notes Receivable
13. Increase/(Decrease) in Notes Payable
14. Plus/(Less) Net Increase/(Decrease) in Long Term Debt (including cur
15. Plus: Increase/(Less: Decrease) in Capital Stock, Paid-in Capital or Me
16. Less: Payment of Dividends
17. Other (Explain)
18.
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>
19. Net Capital Expenditures
20. Long-Term Investments
21. Other (Explain)
22.
23.
24.

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<i>USDA-RUS</i>		BORROWER DESIGNATION	
<b>FINANCIAL AND STATISTICAL REPORT FOR BROADBAND BORROWERS</b>		OR1109	
		PERIOD ENDING December, 2016	
<b>PART E. BIP PERFORMANCE MEASURES</b>			
		New Broadband Service	Improved Broadband Service
1. Number of households subscribing to		6	87
2. Number of businesses subscribing to		1	12
3. Number of educational providers receiving		0	2
4. Number of libraries receiving		0	0
5. Number of health care providers receiving		0	0
6. Number of public safety providers receiving		0	0

<p style="text-align: center;"><i>USDA-RUS</i></p> <p style="text-align: center;"><b>FINANCIAL AND STATISTICAL REPORT FOR BROADBAND BORROWERS</b></p>	<p>BORROWER DESIGNATION OR1109</p> <hr/> <p>PERIOD ENDING December, 2016</p>
<p style="text-align: center;"><b>Notes to Operating Report - Broadband</b></p>	