SOUTH DAKOTA PUBLIC UTILITIES COMMISSION LIFELINE/TRIBAL LINK UP ADVERTISING/OUTREACH ANNUAL REPORT JULY 1, 2014

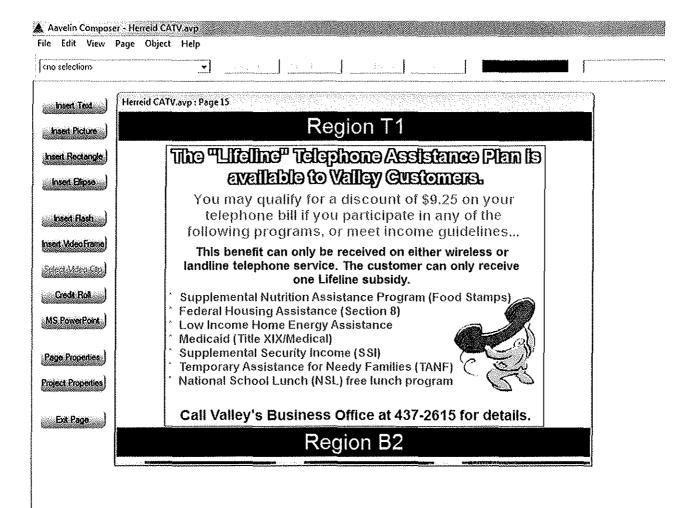
| Company: <u>Valley Telecommunications Cooperative Association</u> | | | |
|---|-------------------|--|--|
| Address: | PO Box 7 | | |
| | 102 Main St S | | |
| | Herreid, SD 57632 | | |
| Telephone number: | (605) 437-2615 | | |
| Company contact: | Mindi Rueb | | |
| Study Area Code: | 391685 | | |

Lifeline/Tribal Link Up Advertising/Outreach Activities:

| <u>X</u> | Advertise in media of general distribution.* (See attached advertisement(s).) |
|----------|--|
| <u>X</u> | Letter to existing and new customers regarding the availability of Lifeline/ Tribal Link Up.* (See attached letter.) |
| <u>X</u> | Company's Lifeline/Tribal Link Up information in directory. |
| <u>X</u> | Company's Lifeline/Tribal Link Up information available on Company website. ((http://valleytel.net) |
| <u>x</u> | Company's information posted on USAC website. |
| | Other (describe): |
| | |
| | |

*Required

Video TV (channel 2)





Dear Customer:

Valley Telecommunications participates in the Lifeline Telephone assistance program. Lifeline assistance is available to participants in one or more of the following programs:

- Medicaid
- SNAP Supplemental Nutrition Assistance Program (formerly Food Stamps)
- Supplemental Security Income (SSI)
- Federal Public Housing Assistance
- Low Income Housing Energy Assistance
- Temporary Aid to Needy Families (TANF)
- National School Lunch (NSL) free lunch program.
- Or
 - Individuals whose household income is at or below 135 percent of the Federal Poverty. Guidelines are also eligible for Lifeline assistance.

If you are eligible for Lifeline assistance under any of the programs listed above, please complete the enclosed application.

If you qualify for Lifeline assistance based on household income, please complete the enclosed <u>application</u> and <u>Income Certification Form</u>, attach the required documentation* and return it to our office in the enclosed return envelope.

*Documentation of income eligibility includes the previous year's state or federal tax return, a current income statement from an employer or paycheck stub, a Social Security statement of benefits, or other such official documents. If your documentation does not cover an entire year, please provide three consecutive month's worth of the same type of document. Please note that *income* is all income actually received by <u>all</u> members of the household. Income includes salary before deductions for taxes, public assistance benefits, Social Security payments, pensions, unemployment compensation, veteran's benefits, inheritances, alimony, child support payments, worker's compensation benefits, gifts and lottery winnings. The only exceptions are student financial aid, military housing and cost-of-living allowances and irregular income from occasional small jobs such as baby-sitting or lawn mowing.

If you require assistance completing the forms, please feel free to stop by our office at 102 Main St in Herreid or you may contact our business office at 437-2615 and we will be happy to assist you.

Please note that Federal Communications Commission (FCC) guidelines require telephone companies, like ours, to annually verify a sample of Lifeline customers' for continued eligibility in the program. You may be required to complete the application and/or provide additional information on a yearly basis for random sampling purposes. This benefit can only be received on either wireless or landline telephone service. Each customer can only receive one Lifeline subsidy.



URGENT! Please sign and return immediately!

Consent to Provide Lifeline Subscriber Information to the National Lifeline Accountability Database

The Federal Communications Commission has established the National Lifeline Accountability Database ("Database") to detect and prevent consumers from receiving more than one discounted telephone service under the federal Lifeline program.

Under federal law, Valley Telecommunications is required to check/query this Database prior to signing up Lifeline subscribers and is also required to provide to the federal administrator of this Database the following information regarding each new and existing Lifeline subscriber:

- The Lifeline subscriber's full name;
- The Lifeline subscriber's full residential Address;
- The Lifeline subscriber's date of birth;
- The last four digits of the Lifeline subscriber's Social Security number or Tribal Identification Number (if the subscriber is a Tribal member and does not have a Social Security number);
- The telephone number associated with the Lifeline service;
- The date on which the Lifeline service was initiated;
- The date on which the Lifeline service was terminated (if applicable);
- The amount of Lifeline service support being sought for the subscriber;
- The means through which the subscriber qualified for Lifeline service (income or programbased, Medicaid, etc.).

The above information related to your Lifeline service is being provided by Valley Telecommunications to the federal administrator (the "Universal Service Administrative Company" and/or its agents) of the National Lifeline Accountability Database to verify that you, as a Lifeline applicant and/or subscriber, are not receiving more than one Lifeline benefit, and to otherwise ensure proper administration of the Lifeline program.

I, the Lifeline applicant/subscriber, acknowledge that Valley Telecommunications will transmit to the federal administrator of the National Lifeline Accountability Database the above-referenced information about my Lifeline account and/or service for inclusion into the Database, and hereby consent to transmission of the information for purposes allowed by law relating to administration of the Lifeline program.

I further understand that a failure to provide this consent to release my Lifeline account and/or service information to the federal administrator for inclusion in the National Lifeline Accountability Database will result in a denial of or de-enrollment from Lifeline service.

Signature

Date

Lifeline application - Page 1 Lifeline Assistance Certification Form

(Please Print or Type)

| Last Name: | | _ First Name: | First Name: | | ddle Initial: |
|---------------------------|--|---|----------------|---------------|-----------------------|
| Residen <i>(Do not</i> | itial Address: use a P.O. Box address.) | City: | | State: | ZIP: |
| ls your r | residential address a permanent address? | Yes | No | | |
| Billing A (If differ | ddress: rent from residential address.) | City: | | State: | ZIP: |
| Social Se | ecurity Number (last four digits): | | | | |
| Date of | Birth: | | | | |
| Telepho | ne Number: | (if existing ser | vice) | | |
| Telepho | ne number where you can be reached or | receive messages: | | | |
| Are you | currently receiving Lifeline assistance thr | rough any other tel | ephone provi | der? Yes | No |
| I am cer | tifying eligibility for :Lifeline (m | onthly telephone se | ervice discour | nt) | |
| | r more of my dependents or my househol all that apply.) | ld currently particip | ate in one or | more of the f | ollowing programs: |
| ····· | Medicaid (e.g. Title XIX/Medical State Sup Supplemental Nutrition Assistance Progra Supplemental Security Income (SSI) Federal Public Housing Assistance (Sectio Low-Income Energy Home Assistance Pro Temporary Assistance for Needy Families National School Lunch Program's Free Lu | am (SNAP, formerly on 8) ogram (LIHEAP) s (TANF) | | od Stamps) | |
| | <u>OR</u> | | | | |
| | My household income is at or below 135 household is: | % of the Federal Pc | verty Guideli | nes. The num | ber of individuals in |

If not currently participating in one or more of the programs listed above, I qualify for Lifeline because my household income does not exceed 135% of the Federal Poverty Guidelines (see table below). 2014 Health and Human Services Poverty Guidelines

my

| 2014 Hounn c | ind Human bervices i overty Guidennes | | |
|--------------|---------------------------------------|-----------|-------------------------|
| Number in | 135% Guideline (Annual) | Number in | 135% Guideline (Annual) |
| Residence | | Residence | |
| 1 | \$15,755 | 5 | \$37,679 |
| 2 | \$21,236 | 6 | \$43,160 |
| 3 | \$26,717 | 7 | \$48,641 |
| 4 | \$32,198 | 8 | \$54,122 |
| | | | |

For each additional person after 8, add \$5,481 to the annual guideline.

****Please note that there is more information needed on the back of this page.****

Important Information

Lifeline is a federal government assistance benefit and willfully making false statements to obtain the benefit can result in fines, imprisonment, de-enrollment, or being barred from the program.

Only one Lifeline service is available per household. A household is defined, for the purposes of the Lifeline program, as any individual or group of individuals who live together at the same address as one economic unit. An "economic unit" consists of all adult individuals contributing to and sharing in the income and expenses of a household. A household may include related and unrelated persons. A household is not permitted to receive Lifeline benefits from multiple providers. Violation of the one-per-household limitation constitutes a violation of the Federal Communications Commission's rules and will result in your de-enrollment from the program. Lifeline is a non-transferable benefit and you may not transfer your benefit to any other person.

I certify, under penalty of perjury, that:

(1) I meet the income-based or program-based eligibility criteria for receiving Lifeline, provided in 47 C.F.R. § 54.409;

(2) I will notify the carrier within 30 days if, for any reason, I no longer satisfy the criteria for receiving Lifeline including, as relevant, if I no longer meet the income-based or program-based criteria for receiving Lifeline support, I am receiving more than one Lifeline benefit, or another member of my household is receiving a Lifeline benefit;

(3) If I move to a new address, I will provide that new address to the telephone company within 30 days;

(4) If I provided a temporary residential address to the telephone company, I will meet requirement to verify my temporary residential address every 90 days;

(5) My household will receive only one Lifeline service and, to the best of my knowledge, my household is not already receiving a Lifeline service;

(6) The individual named on the documentation provided previously to demonstrate program-based eligibility, if not me, is part of my household.

(7) I acknowledge that I may be required to re-certify my continued eligibility for Lifeline at any time, and my failure to re-certify as to my continued eligibility will result in de-enrollment and the termination of my Lifeline benefits pursuant to 47 C.F.R. § 54.405(e)(4);

(8) I acknowledge that providing false or fraudulent information to receive Lifeline benefits is punishable by law; and

(9) The information contained in this Re-Certification Form is true and correct to the best of my knowledge.

Signature

Date

Return this completed Re-Certification form to Valley Telecommunications. The company will contact you if any additional information is needed to prove your continued eligibility.

For more information about Lifeline, see www.PUC.SD.gov/Lifeline

Lifeline application (by income)

Dear Customer,

If you qualify for the Lifeline discount based on *income* criteria, you <u>MUST</u> complete this form. If you qualify based on *program* criteria, you <u>DO NOT</u> need to complete this form.

| Customer Name | Customer Telephone Number | Date | Time |
|---------------|---------------------------|------|------|
| | | | |

**Please complete the following section and return to Valley with supporting income documentation. The documentation will be verified and certified, and may be returned to you upon your request.

| Self C | Certification for Life | eline Under Income-Based Crit | eria |
|---------------------------------------|------------------------------------|--|----------------------------------|
| I, | | | enalty of perjury that I qualify |
| (Custon | er requesting Lifeline/Link-up Ass | istance) | |
| for Lifeline/Link-Up assistance bas | sed on my household incor | me that is at, or below, 135 percent of the Fe | ederal Poverty Guidelines. |
| I further certify under penalty of pe | erjury that there are | members in my household and t | hat the supporting income |
| documentation presented to Valle | y Telecommunications Co | op., Assn., Inc. accurately represents the an | inual income of all members |
| of my household. I agree to notify | Valley Telecommunication | ns Coop., Assn., Inc., if/when I no longer qu | alify for Lifeline |
| Assistance under the income bas | ed criteria. I certify that nei | ther I, nor anyone else in my household, is o | currently receiving Lifeline |
| program benefits for wireless or tr | aditional telephone service | e and I understand the program rules state t | hat no qualifying |
| Consumer is permitted to receive | more than one Lifeline sub | osidy concurrently. | |
| Customer's Signature: | | Date: | Time: |
| Customer's Printed Name: | | | |
| Please list the following info | rmation for all househ | old members, including yourself. | |
| · · · · · · · · · · · · · · · · · · · | | AMOUNT OF INCOME | |
| FULL NAME | DATE OF BIRTH | CONTRIBUTED TO HOUSEHOLD | SOURCE OF INCOME |
| | | | |
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| | | | |
| | | | |

(FOR COMPANY USE ONLY - CUSTOMER DO NOT COMPLETE)

Company Certification for Receipt of Income Supporting Documentation

I acknowledge that Valley Telecommunications Coop., Assn., Inc. has received self-certification and income documentation from the applicant as listed above. I certify that the documentation provided by this applicant is proprietary and for the sole purpose of verifying income-based eligibility in the Lifeline/Link-Up telephone assistance programs.

 Customer Service Representative, Valley Telecommunications Coop., Assn., Inc.
 Witness

 Date and Time
 Date and Time

Lifeline Income Based Self-Certification Income Certification and Company Certification for Receipt of Income Documentation REV 05/25/12

WHO IS ELIGIBLE?

Telephone service must be in the applicants mame. The applicant must participate in at least one of the following public assistance programs to be eligible (documentation required):

- Supplemental Nutrition Assistance Program
- Federal Housing Assistance (Section 8)
- Low Income Home Energy Assistance
- Medicaid (Title XIX/Medical, State Supplemental Assistance)
- Supplemental Security Income (ssi)
- Temporary Assistance for Needy Families (TANF)
- National School Lunch (NSL) free lunch program

OTHER WAYS TO QUALIFY

A recent FCC ruling has added an additional eligibility criterion that is purely "income-based," and is not tied to subscriber participation in the previously mentioned government assistance programs. You are now eligible to participate in Lifeline if the your income is at ,or below 135% of the Federal Poverty Guidelines.

| Size of Family Unit | 2013 Req. |
|--|-----------|
| 1 | \$15.512 |
| 2 | \$20,939 |
| 3 | \$26,366 |
| 4 | \$31,793 |
| 5 | \$37,220 |
| 6 5 | \$42,647 |
| 7 | \$48,074 |
| 6 7 8 For Each Additional Person, Add | \$53,501 |
| For Each Additional Person, Add | \$ 5,427 |

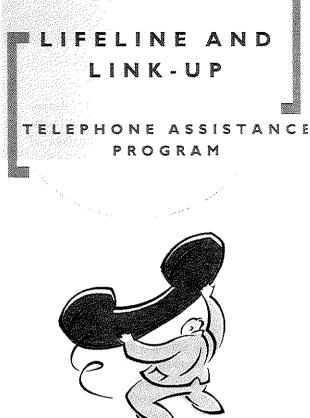
THE TRANSITION TO DIGITAL TV

After June 12, 2009, a television receiver with only an analog broadcast tuner will require a converter box to receive full power over-the-air broadcasts with an antenna because of the Nation's transition to digital broadcasting.

Analog-only TVs should continue to work as before to receive low power, Class A or translator television stations and with cable and satellite TV services, gaming consoles, VCRs, DVD players and similar products.

The DTV transition will have no effect on Valley Video TV subscribers. Analog sets not connected to a cable/video tv service may need additional equipment (i.e. converter box) or may have to be replaced.

Information about the DTV transition is available from <u>www.DTV.gov</u> and from <u>www.dtv2009.gov</u> or 1-888-DTV-2009.





Valley Telecommunications Coop Assn Inc. PO Box 7 ~ 102 Main St S Herreid SD 57632-0007 www.valleytel.net

> Phone: 437-2615 Toll Free: 1-800-437-2615 Fax: 437-2220

Updated 03/01/13

WHAT IS LIFELINE?

THE PROGRAM

Changes brought about by the Federal Telecommunications Act of 1996 have resulted in the introduction of low-income assistance programs in South Dakota. Low-income subscribers may qualify to receive reduced monthly and installation charges for basic telephone service.

Valley Telecommunications Cooperative Assn, Inc. is authorized to provide two federal telephone assistance programs that were developed in response to concerns about the affordability of telephone service for low-income citizens.

The Lifeline program provides a reduction in basic monthly telephone service equal to the residential subscriber line charge, plus an additional amount of \$2.75. The credit applies to the main home telephone line listed in the name of the subscriber. Lifeline subscribers may also receive blocking of long distance calls on their telephone line at no charge.

INCOME CERTIFICATION

If you qualify under the income-based eligibility criteria, and wish to apply for Lifeline Assistance. you must provide our office with supporting documentation of income.* Acceptable documentation of income eligibility includes the prior year's state, federal, or tribal tax return, a current income statements from an employer or paycheck stub, a Social Security statement of benefits, a Veterans Administration statement of benefits, a retirement/pension statement of benefits. and Unemployment/Workmen's Compensation statement of benefits, federal notice of letter of participation in General Assistance, a divorce decree, child support, or other official document. (Subsection 54.410(a))

*Income for eligibility requirements is defined to include "all income actually received by all members of the household." Income is considered "gross" income, prior to taxes. Exceptions to income include student financial aid, military housing, and cost of living allowances, and irregular income from occasional small jobs.

***This benefit can only be received on either wireless or landline telephone service. Each customer can only receive one subsidy.**

COULD I BECOME INELIGIBLE?

If you no longer participate in any of the qualifying public assistance programs, you are no longer eligible for telephone assistance under the program based criteria.

By signing and submitting the application, you certify under penalty of perjury that you, in fact, qualify for Lifeline and Link-Up benefits, and if, at any time, you become ineligible, you will notify Valley Telecommunications Cooperative Assn., Inc.

In addition, Valley's compliance with the FCC Regulations will include annual verification of eligibility of program participants. Verification procedures may include random beneficiary audits, periodic submission of documents, or annual selfcertification.

HOW DO I APPLY?

If you meet the eligibility requirements, completely fill out and sign the application form provided with this brochure (include documentation) and mail it to:

Valley Telecomunications Cooperative

PO Box 7 Herreid SD 57632-0007

If you are applying for assistance under the income-based criteria, you must also include the supporting documentation of income as indicated.

Telephone Assistance Programs

Changes brought about by the Federal Telecommunications Act of 1996 have resulted in the introduction of low-income assistance programs in South Dakota. Low-income subscribers may qualify to receive reduced monthly and installation charges for basic telephone service.

Valley Telecommunications Cooperative Assn., Inc. is authorized to provide two federal telephone assistance programs that were developed in response to concerns about the affordability of telephone service for low-income citizens.

> The Lifeline program provides a reduction in basic monthly telephone service equal to the residential subscriber line charge, plus an additional amount of \$2.75. The credit applies to the main home telephone line listed in the name of the subscriber. Lifeline subscribers may also receive blocking of long distance calls on their telephone line at no charge.

Telephone service must be in the applicant's name. The applicant must participate in at least one of the following public assistance programs to be eligible:

- Supplemental Nutrition Assistance Program
- Federal Housing Assistance (Section 8)
- Services Low Income Home Energy Assistance
 - Medicaid (Title XIX/Medical, State Supplemental Assistance)
 - Supplemental Security Income (SSI)
 - Temporary Assistance for Needy Families (TANF)
 - National School Lunch (NSL) free lunch program

(Continued) Telephone Assistance Programs

Other ways to gualify

A recent FCC ruling has added an additional eligibility criterion that is purely "income-based," and is not tied to subscriber participation in the previously mentioned government assistance programs. You are now eligible to participate in Lifeline if your income is at, or below, 135% of the Federal Poverty Guidelines.

| Size of Family Unit | 2013 Requirements |
|------------------------------|-------------------|
| 1 | \$15,512 |
| 2 | \$20,939 |
| 3 | \$26,366 |
| 4 | \$31,793 |
| 5 | \$37,220 |
| 6 | \$42,647 |
| 7 | \$48,074 |
| 8 | \$53,501 |
| For each additional person a | dd: \$ 5,427 |

Income Certification

If you qualify under the income-based eligibility criterion, and wish to apply for Lifeline Assistance, you must provide our office with supporting documentation of income.* Acceptable documentation of income eligibility includes the prior year's state, federal, or tribal tax return, a current income statement from an employer or a paycheck stub (at least 2 months), a Social Security statement of benefits, a Veterans Administration statement of benefits, a retirement/pension statement of benefits, an Unemployment/Worker's Compensation statement of benefits, federal notice of letter of participation in General Assistance, a divorce decree, child support, or other official documentation. (Subsection 54.410(1)).

*Income for eligibility requirements is defined to include "all income actually received by all members of the household." Income is considered "gross" income, prior to taxes. Exceptions to income include student financial aid, military housing and cost of living allowances, and irregular income from occasional small jobs.

Call us at 437-2615

Call us at 437-2615





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Page 6



(Continued) Telephone Assistance Programs

Could I become ineligible?

If you no longer participate in any of the qualifying public assistance programs, you are no longer eligible for telephone assistance under the program based criterion.

By signing and submitting the application, you certify under penalty of perjury that you, in fact, qualify for Lifeline benefits, and if, at any time, you become ineligible, you will notify Valley Telecommunications Cooperative Assn., Inc.

In addition, Valley's compliance with the FCC Regulations will include annual verification of eligibility of program participants. Verification procedures include annual recertification.

How do I apply?

If you meet the eligibility requirements, completely fill out and sign the application form provided and mail it to:

Valley Telecommunications Cooperative

PO Box 7

Herreid, SD 57632

If you are applying for assistance under the income-based criterion, you must also include the supporting documentation of income as indicated.

| | | (Please Print) | |
|-----------|--|------------------------------------|-----------------------------|
| Name | | | |
| | (Last) | (First) | (Middle) |
| • | | | |
| Address | (Street) | (City) | (State) (ZIP) |
| Valley Te | elco Assigned Telephone | Number () | |
| | | | |
| Number | where you can be reache | ed: () | _ |
| Please a | answer the following qu | estions (check appropriate line | s): |
| < 1. | er og sking for | 1 °P 1 | |
| 1. la | m applying for: | Lifeline monthly telephone servic | e discount |
| NOTE: T | ELEPHONE SERVICE | MUST BE IN APPLICANT'S NAM | Æ. |
| 2. ian | n ouronthi portiolootiga k | n the fellowing proceed(s): (check | k all that analy) |
| 2. I an | in currently participating it | n the following program(s): (checi | (an mac apply) |
| | Medicaid (ex | . Title XIX/Medical, State Suppler | nental Assistance) |
| | Supplementa | I Nutrition Assistance Program (F | Food Stamps) |
| | Supplementa | I Security Income (SSI) | |
| | Federal Publ | ic Housing Assistance | |
| | Low-Income | Home Energy Assistance | |
| | Temporary A | ssistance for Needy Families (TA | NF) |
| | National Sch | ool Lunch (NSL) free lunch progn | am |
| OR | | | |
| З. | | d income is at or below 135 perce | |
| | Poverty Guid | lelines. (documentation required) | |
| | | | n inc if/when i no longer o |
| | to notify Valley Telecor on the above criteria. | nmunications Cooperative Ass | n, no. minet i no longer q |

Lifeline Assistance Application

Call us at 437-2615

Your Signature

Date

TELEPHONE ASSISTANCE PLAN

the Program

Changes brought about by the Federal Telecommunications Act of 1996 have resulted in the introduction of low-income assistance programs in South Dakoia. Low-income subscribers may qualify to receive reduced monthly and installation charges for basic telephone service.

Valley Telecommunications Coop. Assn. Inc. is authorized to provide the federal telephone assistance program that was developed in response to concerns about the affordability of telephone service for low-income citizens.

Affeline

The Lifeline program provides a reduction in basic monthly telephone service of \$9.25°. The credit applies to the main home telephone line listed in the name of the subscriber. Lifeline subscribers may also receive blocking of long distance calls on their telephone line at no additional charge.

- * May be subject to change by the FCC.
- " This benefit can only be received on either wireless or landline telephone service. Each customer can receive only one subsidy.

who is digible?

Telephone service must be in the applicant's name. The applicant must participate in at least one of the following public assistance programs to be eligible:

- Supplemental Nutrition Assistance Program
- Federal Housing Assistance (Section 8)
- Low Income Home Energy Assistance
- Medicaid (Title XTX/Medical, State Supplemental Assistance)
- Supplemental Security Income (SSI)
- Temporary Assistance for Meedy Families (TANF)
- Mational School Lunch (MSL) Free Lunch Program

Survey Conserved Survey Conserved Survey Conserved S

Coher Ways to Quality

A recent FCC ruling has added an additional eligibility criterion that is purely "income-based", and is not ded to subscriber participation in the previously mendioned government assistance programs. You are now eligible to participate in Lifeline if your income is at, or below 135% of the Federal Poverty Guidelines. Current guidelines may be obtained by contacting Valley Telecommunications Coop. Assn., Inc. or visit www.universalservice.org.

heome Certification

If you qualify under the income-based eligibility criteria, and wish to apply for Lifeline Assistance, you must provide our office with supporting documentation of income.' Acceptable documentation of income eligibility includes the prior year's state, federal, or tribal tax return; a current income statement from an employer or paycheck stub; a Social Security statement of benefits; a Veterans Administration statement of benefits; a retirement/pension statement of benefits; and unemployment/workmen's compensation statement of benefits; federal notice of letter of participation in General Assistance, a divorce decree, child support, or other official document. (Subsection 54,410(a))

- * Income for eligibility requirements is defined to include "all income actually received by all members of the household." Income is considered "gross" income, prior to texes. Exceptions to income include student financial aid, military housing, and cost of living allowances, and irregular income from occasional small jobs.
- * May be subject to annual verification procedures.

Could Decome ineligible?

If you no longer participate in any of the qualifying public assistance programs, you are no longer stigible for telephone assistance under the program based criteria.

By signing and submitting the application, you certify under penalty of perjury that you, in fact, qualify for Lifeline benefits, and if, at any time, you become ineligible, you will notify Valley Telecommunications Coop. Assn., Inc.

In addition, Valley's compliance with the FCC Regulations will include annual verification of eligibility of program participants. Verification procedures may include random beneficiary audits, periodic submission of documents, or annual self-certification.

diase to Apply

Contact Valley Telecommunication: Coop. Assie, Inc. to obtain an application and income certification and verification form and provide all supporting documentation to Valley's business office at: PO Box 7, 102 Main St. S., Herreid, SD 57632; or call 437-2615.

Forms and Policies - ValleyTel



Home Services General Support Information

About Us E-Bill

Webmail Phone Portal

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Home / About Us / Forms and Policies

SUPPORT

General Support Information

Forms and Policies



Forms

- Application for Service Business
- Application for Service Residential
- Lifeline Application
- Deny Origination Form
- Lifeline Application
- Registration for Non-Persons 2012
- Automatic Payment Plan Authorization Form
- Total Maintenance Plans
- Donation/Sponsorship Application

Policies

- Telephone Collection Policy (Board Policy No. 108)
- · Video, Internet, and Wireless Collection Policy (Board Policy No. 108-A)
- Account/Service Activation Policy (Board Policy No. 108-B)
- Network Management Practices Policy Disclosure
- + 2013 HAC Compatibility for Wireless Devices

Valley is committed to providing quality services that exceed our customers' expectations with our services, and our customer service. We will provide a company atmosphere that promotes continued growth and prosperity of our employees, company and community.

To learn more Cliek Here

Stay connected with us our activities On Facebook

> our latest tweets On Twitter

our latest videos On YouTube Want to say hello?

Call: 605.437.2615

Write: P.O. Box 7, 102 Main SL S Herreid, SD 57632

View Contact Page:

Designed & Produced by:

PIVOŤ

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http://www.valleytel.net/about-us/forms-and-policies/

Advertisement in papers

Heartland Publishing, Inc.

Prairie Pioneer 117 Main St. PO BOX 218 POLLOCK, SD 57648-0218 USA

Voice: 605-889-2320 Fax: 605-889-2361

| Bill To: | | | |
|----------|------------------------------|---------|--|
| PO BOX | TELECOMN 7), SD 57632 | ONS | |

Invoice Number: 37470

Invoice Date: Jun 13, 2013 Page: 1

| | o to: | | | | |
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| Customer ID | Customer PO | t Terms | | |
|--------------|-----------------|------------|----------|---|
| V001 | | Due at end | of Month | |
| Sales Rep ID | Shipping Method | Ship Date | Due Date | |
| | | | 6/30/13 |] |

| Quantity | Item | Description | Unit Price | Amount |
|-----------------------|-----------------------------|-------------------------|--|--------|
| 1.00 | AD | UNIVERSAL PHONE SERVICE | 135.10 | 135.10 |
| | DS-P | DISCOUNT | 6.76 | -6.76 |
| | Yarodan SDE Allo Laride. | · | | |
| L | | Subtotal | | 128.34 |
| | | Sales Tax | | |
| | | Total Invoice Amount | | 128.34 |
| Check/Credit Memo No: | | Payment/Credit Applied | | |
| | | TOTAL | ударан улаан на со около на наказа се 1929 со 1996 тока и _{сил} ирија и родиција и ок | 128.34 |

We accept credit cards. Call today to pay your bill.

Affidavit of Publication

STATE OF SOUTH DAKOTA

COUNTY OF CAMPBELL

ss:

I, Leah Burke, being first duly sworn under oath say: the **Prairie Pioneer** is a legal weekly newspaper of general circulation as required by South Dakota Codified Laws, and any acts amendatory thereto, published to Allan and Leah Burke in said county and state, and has been such legal newspaper during the time hereinafter mentioned; that during all of said time as an employee or officer of said newspaper, I have had personal knowledge of the facts stated in this affidavit; that the advertisement headed:

Valley Telecommunicatio Universal Telephone Serv

Under the Telecommunications Act of 1996, "universal se telephone service is available to all customers. Universal se access to the telecommunications network, local usage at n access to emergency 911 services, and toll limitation servic income consumers. All of these services are available from Val Glenham, Herreid, Hosmer, Ipswich, Leola, Long Lake, Mound

2013 Monthly Charges for Residential Ser

| Basic local resident service | |
|---|----------------------|
| (Including extended area service to des | signated nearby se |
| Longing Geraice | No ac |
| Single Party Service | |
| Access to emergency service | No ac |
| Local dovernment processes a the one | No ac |
| Local government assesses a \$1.25 ta | x to pay for special |
| reacted to operator services | No ac |
| Access to directory assistance | No ac |
| (Charges for services provided by Dire | otony Applatance |
| | outry Assistance Vi |
| Federal Universal Service Charge | iny who provided the |
| Federal Access Charge | 15.50% (cha |
| (Electronic Clarge | |
| (Flat rate prescribed by Federal Con | munications Com |

Lifeline Low Income Discounts

To prevent long distance calls made from your phone, toll available at no charge to low-income consumers



102 Main St S ~ PO Herreid SD 57632-1 605-437-2615 or 1-800www.valleytel.ni Universal Telephone Service

A printed copy of which is hereto attached, was printed and published in said newspaper for...l. successive weeks upon the following dates, to

wit:

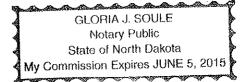
...

| 6/13,20.13 | |
|------------|------|
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| , 20 | , 20 |

That the full amount of the fees charged for publishing the same to wit: the sum of $\frac{1782}{1782}$

inures solely to the benefit of the publishers of said newspaper; that no agreement or understanding for any division of this sum has been made with any other person; and that no part of said sum has been agreed to be paid to any person whomsoever.

subscribed and sworn to before me this



N.W. Blade

PO Box 797 Eureka, SD 57437

Invoice

| Date | Invoice # |
|-----------|-----------|
| 6/13/2013 | 8889 |

| Bill To | | |
|--------------------------|---------|------|
| Valley Teleo Cooperative | | |
| 102 Main St. S. | | |
| PO Box 7 | | |
| Herried, SD 57632 | | |
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| | | P.O. No. | Terms | Project |
|----------------|---|--------------------------------------|--------|---------|
| | | | Net 30 | |
| Quantity | Description | I | Rate | Amount |
| 12 | 6-13-13 2013 Monthly Charges for Residential Serv 6-20-13 Ends June 30th! Three Months Free Voice SD Sales Tax Newdor - 3357 AC-1-67728 57.00 1-6613 (6.63 | ices Service Full Color Display A | | |
| nk you for you | ır business. | | Total | \$122.6 |

AFFIDAVIT OF PUBLICATION

The Northwest Blade



P. O. Box 797; Eureka, SD 57437 605-284-2631

STATE OF South Dakota; COUNTY OF McPherson

I, Cindy Schumacher, am authorized by the publisher as agent to make this affidavit of publication. Under oath, I state that the following is true and correct.

The Northwest Blade is a newspaper which is published weekly and is of general circulation and is in compliance with South Dakota Newspaper Association legalized Statutes.

The notice has been published in the newspaper listed above.

DATE(S) OF PUBLICATION

| 6-13-13 2013 Monthly Charges For Residential Services |
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| NAME OF THE CORPORATION/GOVERNMENT OFFICE: $\sqrt{a \parallel t_y}$ |
| TYPE OF DOCUMENT: |
| AUTHORIZED SIGNATURE: Circly Churache |
| |
| SUBSCRIBED AND SWORN TO BEFORE ME ON THE |
| 12 DAY OF JULY, 20/3. |
| 15 DAY OF JULY, 2013. NOTARY SIGNATURE: DUNY Kepp |
| a da da compositiva d |

s Items and Re-

Iget requests from s were given to ners and budget gin next month. pdated the board issues the courtthe work that was ewer.

items and reports Register of deeds s collected during Aay 2013 for the 11.25. Register of ation and preserlected during the :013 \$480.00. Au-? with the Treasunt of deposits in 166,637.94; Total al cash, \$1110.03; 'checks and drafts ossession not exdays, \$8458.50; cash, \$42.76; 2.51; Super Sav-76.953.23. chumacher moved onded to adjourn Il voted in favor.

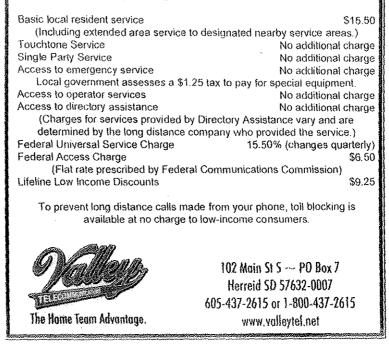
miller ounty Auditor ger he Board of Come at the total apof \$69.68 at .03



Valley Telecommunications Universal Telephone Service

Under the Telecommunications Act of 1996, "universal service" means basic telephone service is available to all customers. Universal service is voice grade access to the telecommunications network, local usage at no additional charge, access to emergency 911 services, and toll limitation services to qualifying low income consumers. All of these services are available from Valley Telco in: Eureka, Glenham, Herreid, Hosmer, Ipswich, Leola, Long Lake, Mound City, and Pollock.

2013 Monthly Charges for Residential Services:



GIBSON PUBLISHING

PO BOX 7 103 Main St. Ipswich, SD 57451

Bill To

Valley Cable & Satellite PO Box 7 Herreid, SD 57632

| | P.O. No. | Terms | Project |
|--|----------|-------|----------------|
| | | | |
| Description | Column | Inch | Amount |
| Universal Services ad - Tribune Universal Services ad - R-H Independent | 10 10 | | 28.00 28.00 |

| Ven | lor- | 342 |
|-----|------|-----|
| AC | 1.66 | 13 |

| Subtotal | \$56.00 |
|------------------|---------|
| Sales Tax (6.0%) | \$0.00 |
| Total | \$56.00 |
| Payments/Credits | \$0.00 |
| Balance Due | \$56.00 |

Invoice

Invoice #

33023

Date

6/12/2013

AFFIDAVIT OF PUBLICATION

State of South Dakota

| , | | |
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| } | SS | |
| ì | | |

County of Edmunds

D.E. Gibson of said county, being, first duly sworn on oath says: That he is the publisher or an employee of the publisher of the **Roscoe-Hosmer Independent**, a weekly newspaper, published in the City of Ipswich, in said County of Edmunds, and State of South Dakota; that he has full and personal knowledge of the facts herein stated; that said newspaper is a legal newspaper as defined in SDCL 17-2-2.1 through 17-2-2.4 inclusive; that said newspaper has been published within the said County of Edmunds and State of South Dakota, for at least one year next prior to the first publication of the attached public notice, and that the advertisement headed

VALLEY TELECOMMUNICATIONS

UNIVERSAL TELEPHONE SERVICE

Signed:....

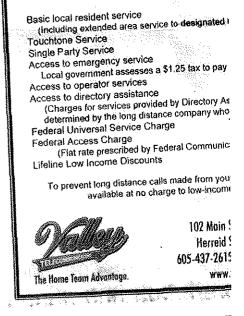
Jena M Gibo

Notary Public - Edmunds County, South Dakota My commission expires <u>February 26, 2019</u>

Valley Telecommunic Universal Telephone §

Under the Telecommunications Act of 1996, 'univer telephone service is available to all customers. U grade access to the telecommunications networ additional charge, access to emergency 911 ser services to qualifying low income consumers. A available from Valley Telco in: Eureka, Glenham, H Leola, Long Lake, Mound City, and Pollock.

2013 Monthly Charges for Residen



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AFFIDAVIT OF PUBLICATION

State of South Dakota

County of Edmunds

|) | |
|---|----|
|) | SS |

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D.E. Gibson of said county, being, first duly sworn on oath says: That he is the publisher or an employee of the publisher of the **Ipswich Tribune**, a weekly newspaper, published in the City of Ipswich, in said County of Edmunds, and State of South Dakota; that he has full and personal knowledge of the facts herein stated; that said newspaper is a legal newspaper as defined in SDCL 17-2-2.1 through 17-2-2.4 inclusive; that said newspaper has been published within the said County of Edmunds and State of South Dakota, for at least one year next prior to the first publica-

tion of the attached public notice, and that the advertisement headed

.....

VALLEY TELECOMMUNICATIONS

UNIVERSAL TELEPHONE SERVICE

56 Signed:..

Jena ni gibson

Notary Public - Edmunds County, South Dakota My commission expires <u>February 26, 2019</u>

Valley Telecommun Universal Telephone

Under the Telecommunications Act of 1998, "unit telephone service is available to all customers grade access to the telecommunications ne additional charge, access to emergency 911 services to qualifying low income consumers available from Valley Telco in: Eureka, Glenhan Leola, Long Lake, Mound City, and Pollock.

2013 Monthly Charges for Resid

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~ PO Box 7 ;7632-9907 1-909-437-2615 sytel.net

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GIBSON PUBLISHING

PO BOX 7 103 Main St. Ipswich, SD 57451

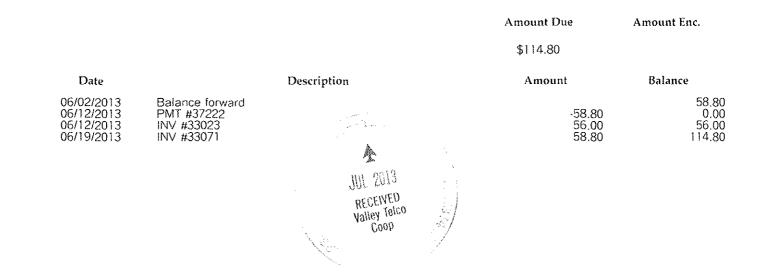
Bill To

Valley Cable & Satellite PO Box 7 Herreid, SD 57632

Statement

Date

6/28/2013



| Current | 1-30 Days Past Due | 31-60 Days Past Due | 61-90 Days Past Due | Over 90 Days Past Due | Amount Due |
|---------|--------------------|---------------------|---------------------|--------------------------|------------|
| 0.00 | 114.80 | 0.00 | 0.00 | 0.00 | \$114.80 |