SOUTH DAKOTA PUBLIC UTILITIES COMMISSION LIFELINE/LINK UP ADVERTISING/OUTREACH ANNUAL REPORT JUNE 1, 2016

Company:	-	James Valley Cooperative Telephone Company
Address:	_	235 E 1st Avenue
	_	Groton, SD 57445
	_	
Telephone n	umber: _	605-397-2323
Company co	ntact: _	Stacy Oliver
Study Area C	Code: _	391664
Lifeline/Link	Up Adve	ertising/Outreach Activities:
X		se in media of general distribution.* (See attached sement(s).)
<u> </u>		o existing and new customers regarding the availability of /Link Up.* (See attached letter.)
X	Compa	ny's Lifeline/Link Up information in directory.
X		ny's Lifeline/Link Up information available on Company website.
X	Compa	ny's information posted on USAC website.
	Other (describe):

*Required

Ad in James Valley area newspapers

Yes, You Can Afford Telephone Service, and JVT Can Show You How!

Federal and state lawmakers believe that every person in America should have access to quality, affordable telecommunications service. In fact, they've created a system to do just that.

If you participate in programs such as food stamps, Medicaid, the national school free-lunch program, Section 8 housing or supplemental security income or if your household income is below a certain threshold level, you may qualify for a discount on your telephone bill.

This "universal service" support includes:

Lifeline assistance that provides discounts for basic monthly telephone service. Toll Limitation Service that allows you to control your long distance charges.

For more information: 397-2323 1-800-556-6525



James Valley Television Ad November 2015 and June 2016

The **Lifeline Program** is a federal program that provides a monthly discount on landline or wireless phone service to eligible low-income households.

If your household income is at or below 135% of the federal poverty guidelines OR you participate in federal/state assistance programs (SSI, SNAP, etc) you may qualify for the Lifeline Program.

For more info, please contact one of the following:

James Valley Telecommunications

235 E 1st Ave Groton 397-2323

NVC

1812 6th Ave SE Aberdeen 725-1000 1316 E 7th Ave Redfield 475-1000



Lifeline Assistance Application and Certification Form

Company Name: James Valley Cooperative Telephone Company SPIN: 143002236

	(Please Print or Ty	/pe)	
Last Name:	First Nam	e:	MI:
Residential Address (Do not u	use a P.O. Box address):		
City:	State:		
Is your residential address a p	permanent address? Yes	s No	
Billing Address (If different fro	,		
City:			
Social Security Number:	al security number, you m	(If you are a membe ay provide your Tribal l	er of a Tribal identification
Date of Birth:			
Telephone Number:		(if existing service)	

Teleph	Telephone number where you can be reached or receive messages:			
-	u currently receiving Lifeline assistance through any other telephone provider? No			
I am ap	pplying for:Lifeline (\$9.25/monthly service discount for Landline Phone)Toll Limitation Service (free toll blocking or toll control)			
02/201	6			
Pleas eligib	se check all that apply and provide documentation to prove bility.			
	or more of my dependents, or my household currently participates in one or more of the ng programs:			
	Medicaid (e.g. Title XIX/Medical State Supplemental Assistance) Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps) Supplemental Security Income (SSI) Federal Public Housing Assistance (Section 8) Low-Income Energy Home Assistance Program (LIHEAP) Temporary Assistance for Needy Families (TANF) National School Lunch Program's Free Lunch Program OR My household income is at or below 135% of the Federal Poverty Guidelines. The number of individuals in my household is:			

If you do not participate in one or more of the programs listed above, you may qualify for Lifeline if your household income does not exceed 135% of the Federal Poverty Guidelines (see table below).

2016 Federal Poverty Guidelines – 135%

Household Size		Household Size		
1	\$16,038	5	\$38,394	
2	\$21,627	6	\$43,983	
3	\$27,216	7	\$49,586	
4	\$32,805	8	\$55,202	

For each additional person after 8, add \$5,616 to the annual guideline.

Source: Federal Register, Vol. 81, No. 15, January 25, 2016, pp. 4036-4037

Important Information

You will be required to provide documentation of eligibility. 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 give JVT permission to release to the Universal Service Administration Company (USAC) or its agent any records required to confirm that my household receives one Lifeline benefit. If USAC
finds that my household receives more than one Lifeline benefit, USAC will notify the telephone companies and I will have to select one service and I will be de-enrolled from the other.
Initial here

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. I have provided documentation of eligibility if required to do so;
- (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 be required 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 demonstrating 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 punishable by law; and	or frauduler	nt information to receive Lifeline benefits	s is
(9) The information contained in this a best of my knowledge.	application a	nd certification form is true and correct	to the
Signature		Date	
Provide the completed application and telephone company will contact you fo		form to your phone company. Your anal information needed to prove eligibil	ity.
For more information al	oout Lifeline,	see www.PUC.SD.gov/Lifeline	
Please return this ap	plication	and all documentation to:	
James V	alley Teleco	ommunincations	
		nue Groton, SD 57445	
605-397	7-2323 or 1	-800-556-6525	
	Office Use	Only	
Employee Signature	Date	Form(s) used to determine elig	ibility