EXHIBIT B-3 (ILEC)

FCC Form 481 - Carrier Annual Reporting REDACTED FOR PUBLIC INSPECTION ON B Control No. 3060-0986/OMB Control No. 3060-0986/OMB Control No. 3060-0989 Data Collection Form

<010>	Study Area Code	391652
<015>	Study Area Name	Clarity Telecom, LLC dba Vast Broadband
<020>	Program Year	2018
<030>	Contact Name: Person USAC should contact with questions about this data	Kristin Burton
<035>	Contact Telephone Number: Number of the person identified in data line <030>	5734812765 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	Kristin.Burton@vastbroadband.com
	Form Type	54.313 and 54.422

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

	Number	Date	Time	Date	_	Customers Affected	Total Number of	Affected	Description (Check	Study Areas	Service Outage	Preventative
	Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		
	NORS									Did This Outage		
<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>></h>
<210>	For the prior	r calendar yea	ar, were there	any reportal	ole voice serv	ice outages?	No					
<039>	Contact Email	Address - Ema	il Address of pe	erson identified	in data line <0	30> Kristin.Bur	ton@vastbroadband	.com				
<035>	> Contact Telephone Number - Number of person identified in data line <030>				30> 5734812765	ext.						
<030>	80> Contact Name - Person USAC should contact regarding this data			Kristin Bur	ton	_	·		_			
<020>	> Program Year			2018								
<015>	> Study Area Name			Clarity Tele	Clarity Telecom, LLC dba Vast Broadband							
<010>	Study Area Code 3				391652							

<d>></d>	<01>	<uz></uz>	<u3></u3>	<u42< th=""><th>₹C1></th><th><c2></c2></th><th>₹u></th><th><e>></e></th><th><1></th><th><g></g></th><th><11></th></u42<>	₹C1>	<c2></c2>	₹u>	<e>></e>	<1>	<g></g>	<11>
NORS									Did This Outage		
Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		
Number	Date	Time	Date		Customers Affected	Total Number of	Affected	Description (Check		Service Outage	Preventative
Number	Date	Time	Date	Tille	customers Affected						
						Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures
	l .				l		l			l	1

` '	ulfilled Service Request ection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	
<010>	Study Area Code		391652		
<015>	Study Area Name		Clarity Telecom, LLC dba Vast Broad	oadband	
<020> Program Year			2018		
<030>	Contact Name - Person USAC should contact regarding this	data	Kristin Burton		
<035>	Contact Telephone Number - Number of person identified	in data line <030>	5734812765 ext.		
<039>	Contact Email Address - Email Address of person identified	in data line <030>	Kristin.Burton@vastbroadband.com	1	
<300> U	nfulfilled service request (voice)		0		
<310> D	Detail on attempts (voice)				
		Nam	ne of Attached Document		
<320> l	Unfulfilled service request (broadband)		0		
<330>	Detail on attempts (broadband)		Name of Attached Document		

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	91652
<015>	Study Area Name	arity Telecom, LLC dba Vast Broadband
<020>	Program Year	18
<030>	Contact Name - Person USAC should contact	regarding this data Kristin Burton
<035>	Contact Telephone Number - Number of pers	son identified in data line 5734812765 ext.
<039>	Contact Email Address - Email Address of per <030>	Son identified in data line Kristin.Burton@vastbroadband.com
<400>	Select from the drop-down list to indicate how voice complaints (zero or greater) for voice to calendar year for each service area in which yeary facilities you own, operate, lease, or other	elephony service in the prior Offered both fixed and mobile voice you are designated an ETC for
<410>	Complaints per 1000 customers for fixed voice	ce 0.0
<420>	Complaints per 1000 customers for mobile vo	pice 0.0
<430>	Select from the drop-down list to indicate ho end-user customer complaints (zero or great the prior calendar year for each service area an ETC for any facilities you own, operate, lea	er) for broadband service in Offered both fixed and mobile broadband in which you are designated
<440>	Complaints per 1000 customers for fixed broad	adband 0.0
<450>	Complaints per 1000 customers for mobile be	roadband 0.0

	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	391652	
<015>	Study Area Name	Clarity Telecom, LLC dba Vast Broadband	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Kristin Burton	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5734812765 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	Kristin.Burton@vastbroadband.com	<u> </u>
<500>	Certify compliance with applicable service quality standards and consumer pro	otection rules Yes	
		391652sd510.pdf	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	ules Compliance	
<515>	Certify compliance with applicable minimum service standards		

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

<010>	Study Area Code	391652
<015>	Study Area Name	Clarity Telecom, LLC dba Vast Broadband
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kristin Burton
<035>	Contact Telephone Number - Number of person identified in data line <030>	5734812765 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Kristin.Burton@vastbroadband.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	391652sd610.pdf

(700) Price Offerings including Voice Rate Data		FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	391652	
<015> Study Area Name	Clarity Telecom, LLC dba Vast Broadband	
<020> Program Year	2018	
<030> Contact Name - Person USAC should contact regarding to	his data Kristin Burton	
<035> Contact Telephone Number - Number of person identifi	ed in data line <030> 5734812765 ext.	
<039> Contact Email Address - Email Address of person identif	ied in data line <030> Kristin.Burton@vastbroadband.com	
<701> Residential Local Service Charge Effective Date <702> Single State-wide Residential Local Service Charge	1/1/2017 24.99	

3>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
					Residential Local			Mandatory Extended Area	
L	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fed
H									
-									
L									
					See at	tached worksheet			
					 	taonoa workonoot			
									
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(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	91652
<015>	Study Area Name	Clarity Telecom, LLC dba Vast Broadband
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kristin Burton
<035>	Contact Telephone Number - Number of person identified in data line <030>	5734812765 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Kristin.Burton@vastbroadband.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
						Broadband Service -			Usage Allowance
	C4-4-	F (11 F.C.)	Davidantial Data	State Regulated	T-4-1 D-4 4 F	Download Speed	Broadband Service -	Usage Allowance	Action Taken When
	State	Exchange (ILEC)	Residential Rate	Fees	Total Rate and Fees	(Mbps)	Upload Speed (Mbps)	(GB)	Limit Reached {select }
				0	. 1				
				- See attacl	nea				
			,	worksheet -	•				

	(800) Operating Companies Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Col	lection Form			July 2013
<010>	Study Area Code		391652	
<015>	Study Area Name		Clarity Telecom, LLC dba Vast Broadband	
<020>	Program Year		2018	
<030>	Contact Name - Person I	USAC should contact regarding this data	Kristin Burton	
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	5734812765 ext.	
<039>	Contact Email Address -	Email Address of person identified in data line <030>	Kristin.Burton@vastbroadband.com	
<810>	Reporting Carrier	Clarity Telecommunications dba Vast Broadban	d	
<811>	Holding Company	Clarity telecommunication (DBA: Vast Broadba	nd)	
<812>	Operating Company	Clarity Telecommunications dba Vast Broadbar	d	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
-			
-			
-			
-	See atta	ached workshe	et
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(900) Tri	bal Lands Reporting	FCC Form 481
Data Col	lection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> <015> <020> <030> <035>	Study Area Code Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030>	391652 Clarity Telecom, LLC dba Vast Broadband 2018 Kristin Burton 5734812765 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Kristin.Burton@vastbroadband.com
<900>	Does the filing entity offer tribal land services? (Y/N)	No
<910>	Tribal Land(s) on which ETC Serves	
<920>	Tribal Government Engagement Obligation	Name of Attached Document
to confi	company serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached PDF, on line 920, strates coordination with the Tribal government pursuant to 3(a)(9) includes:	Select Yes or No or Not Applicable
<921> <922>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning;	
<923> <924> <925> <926> <927> <928> <929>	Marketing services in a culturally sensitive manner; Compliance with Rights of way processes Compliance with Land Use permitting requirements Compliance with Facilities Siting rules Compliance with Environmental Review processes Compliance with Cultural Preservation review processes Compliance with Tribal Business and Licensing requirements.	

	REDACT	ニレィし	K FUDLIC INSPECTION	
(1000) V	pice and Broadband Service Rate Comparability			FCC Form 481
Data Coll	ection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819
				July 2013
<010>	Study Area Code		391652	
<015>	Study Area Name		Clarity Telecom, LLC dba Vast Broadb	and
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding this data		Kristin Burton	
<035>	Contact Telephone Number - Number of person identified in data line <03	30>	5734812765 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <0)30>	Kristin.Burton@vastbroadband.com	
<1000>	Voice services rate comparability certification Attach detailed description for voice services rate	Yes		
<1010>	comparability compliance			
	-			
			Name of Attached Docume	nt
<1020>	Broadband comparability certification		- Pricing is no more than th Wireline Competition Bureau	e most recent applicable benchmark announced by
<1030>	Attach detailed description for broadband comparability compliance			

Name of Attached Document

(1100) N	o Terrestrial Backhaul Reporting		FCC Form 481
Data Col	lection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	391652	
<015>	Study Area Name	Clarity Telecom, LLC dba Vast	Broadband
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Kristin Burton	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5734812765 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	Kristin.Burton@vastbroadband.c	com
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<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 upstream within the supported area pursuant to § 54.313(g).	kbps	

(1200) Te	rms and Condition for Lifeline Customers	FCC Form 481
Lifeline	and constant of English contoniers	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	ection Form	July 2013
Data Con		VII.1 2020
<010>	Study Area Code	391652
<015>	Study Area Name	Clarity Telecom, LLC dba Vast Broadband
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kristin Burton
<035>	Contact Telephone Number - Number of person identified in data line <030	> 5734812765 ext.
<039>	Contact Email Address - Email Address of person identified in data line <03	> Kristin.Burton@vastbroadband.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	Name of Attached Document
<1220>	Link to Public Website HTTP	https://www.vastbroadband.com/lifeline-assistance/
or the we	neck these boxes below to confirm that the attached document(s), on line 1210, bsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must 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.	

` '	rice Cap Carrier Additional Documentation		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers			July 2013
<010>	Study Area Code	391652	
<015>	Study Area Name	Clarity Telecom, LLC dba Vast Broadband	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Kristin Burton	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5734812765 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	Kristin.Burton@vastbroadband.com	

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		
<2023>	Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only. 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	FCC Form 481		
Data Collection F	Form	OMB Control No. 3060-0986/OMB Control No.		
Including Rate-of	F-Return Carriers affiliated with Price Cap Local Exchange Carriers	July 2013		
Price Ca	p 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)			

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	391652
<015>	Study Area Name	Clarity Telecom, LLC dba Vast Broadband
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kristin Burton
<035>	Contact Telephone Number - Number of person identified in data line <030>	5734812765 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Kristin.Burton@vastbroadband.com

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.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)					
		?	Yes - At	tach Certifi	icati	on
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}				39	91652sd3010.pdf
(3010B)	Please Provide Attachment	Name of Attached Docu Information	ument Lis	sting Required	<u>ا</u> د	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	Not Applicable - No A	ttachmer.	ıt Required	Г	
(3012B)	Please Provide Attachment	Name of Attached Docu Information	ument Lis	sting Required	t	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	⊙	0	L	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	\cup	•		
(3015)	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: Electronic copy of their annual RUS reports (Operating Report for Telecommunications					
(3016)	Borrowers) 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 Docu Information	ument Lis	iting Required	l t	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line	(Yes/No)	•	0		
(3019)	3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers			·]	
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows			·	İ	
(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:			V]	
(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					391652sd3026.pdf
(3026)	Attach the worksheet listing required information	Name of Attached Docu Information	ument Lis	sting Required	t	391652sd3026.pdf

	EDITOTED FORT ODEIO INOLEOTION
(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	391652
<015>	Study Area Name	Clarity Telecom, LLC dba Vast Broadband
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kristin Burton
<035>	Contact Telephone Number - Number of person identified in data line <030>	5734812765 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Kristin.Burton@vastbroadband.com

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



(4005) Rural Broadband Experiment Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	391652
<015>	Study Area Name	Clarity Telecom, LLC dba Vast Broadband
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kristin Burton
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 5734812765 ext.
<039>	Contact Email Address - Email Address of person identified in data I	ine <030> Kristin.Burton@vastbroadband.com

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.

speed and data usage allowances available in the

relevant geographic area.

ii yes to 4003A, piease provide a response for 4003i	
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 (para	graph 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	Name of Attached Document Listing Required Information ————————————————————————————————————

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

<010>	Study Area Code	391652
<015>	Study Area Name	Clarity Telecom, LLC dba Vast Broadband
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kristin Burton
<035>	Contact Telephone Number - Number of person identified in data line <030>	5734812765 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Kristin.Burton@vastbroadband.com

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

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients 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: Signature of Authorized Officer: Date Printed name of Authorized Officer: Title or position of Authorized Officer: Telephone number of Authorized Officer: Filing Due Date for this form: 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.

	ion - Agent / Carrier ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	391652
<015>	Study Area Name	Clarity Telecom, LLC dba Vast Broadband
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kristin Burton
<035>	Contact Telephone Number - Number of person identified in data line <030>	5734812765 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Kristin.Burton@vastbroadband.com

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

I certify that (Name of Agent)JSI_ also certify that I am an officer of the reporting carrier; my responsibili agent; and, to the best of my knowledge, the reports and data provided	is authorized to submit the information reported on behalf of the reporting carrier. ites include ensuring the accuracy of the annual data reporting requirements provided to the authorized to the authorized agent is accurate.
Name of Authorized Agent: JSI	
Name of Reporting Carrier: Clarity Telecom, LLC dba Vast Br	oadband
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/26/2017
Printed name of Authorized Officer: Kristin Burton	
Title or position of Authorized Officer: Senior Accountant	
Telephone number of Authorized Officer: 5734812765 ext.	
Study Area Code of Reporting Carrier: 391652	Filing Due Date for this form: 07/03/2017
, ,	r fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier		
as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service s he data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the in		
Name of Reporting Carrier: Clarity Telecom, LLC dba Vast Broadband		
lame of Authorized Agent Firm: JSI		
ignature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/23/2017
lame of Authorized Agent Employee: JSI		
itle or position of Authorized Agent or Employee of Agent Regulatory Consultant		
elephone number of Authorized Agent or Employee of Agent: 3014597590 ext.		
tudy Area Code of Reporting Carrier: 391652 Filing Due Date for this form:	07/03/2017	