

525 Western Av, PO Box 588 Brookings, SD 57006 (605) 692-6325



Date 6/29/2017

SOUTH DAKOTA PUBLIC UTILITIES COMMISSION LIFELINE/TRIBAL LINK UP ADVERTISING/OUTREACH ANNUAL REPORT JULY 1, 2017

Company:	City of Brookings Municipal Utilities Telephone Department d/b/a Swiftel Communications			
Address:	PO Box 588 525 Western Ave Brookings, SD 57006			
Telephone n	umber: 605-692-6325			
Company co	ntact: Laura Julius			
Study Area C	Code: 391650 & 399009			
Lifeline/Triba	l Link Up Advertising/Outreach Activities:			
X	Advertise in media of general distribution.* (Attachment A - advertisement(s))			
X	Notice to existing and new customers regarding the availability of Lifeline/ Tribal Link Up.* (Attachment B – bill notices)			
X	Company's Lifeline/Tribal Link Up information in directory. (Attachment C)			
X	Company's Lifeline/Tribal Link Up information available on Company website at (http://swiftel.net/?page_id=464 .			
X	Company's information posted on USAC website. (Attachment D)			
X	Other (describe): Posters and brochures place in offices and other public places where customers who qualify are likely to see them. (Attachment E)			
*Required				

Laura Julius
Finance & Accounting Manager
Swiftel Communications

PO Box 588 - Brookings, SD 57006-0588



December 2016

25 Western Ave - 605-692-6325

Annual Recertification Letter Wforms

<Customer Name>
<Mailing Address>
BROOKINGS SD 57006

RE: Lifeline Discount on Swiftel service; Acct #xxxxxxx

Dear < Customer Name>:

The LIFELINE telephone discount you now receive is changing. The changes are outlined below:

- NO LONGER qualifying programs: Low Income Home Energy Assistance (LIEAP or LIHEAP);
 Temporary Assistance for Needy Families (TANF); National School Lunch (NSL) free lunch program
- NEW qualifying programs: Veteran's Pension; Survivor's Pension
- PROOF of program participation needs to be retained by our company (it will be kept secured with very limited access only by authorized personnel)
- RECERTIFICATION will be done throughout the year, starting in July 2017, based on the 'anniversary date' of when each customer began receiving the Lifeline discount; in prior years, recertification was done once a year in December

Please complete the enclosed Recertification and Consent forms, and return them in the envelope provided, along with copies of the documentation for your participation in the program(s) indicated on the recertification form.

Thank you for your attention to this. Please call me at 605-692-6325 with questions.

Sincerely,

Jane Siekmann Billing & Collection Supervisor Swiftel Communications/Brookings Utilities

Encl.



Lifeline Assistance Application

Use this form Dec 2016-Dec 2017

Please Print ~ all fields are required			
Swiftel/Sprint Account #: Swiftel/Sprint Phone #:			
Name of Applicant:	(M. l.)	(Last)	
Service Address:Physical street address; No PO Box #	City	50	State ZIPcode
Billing Address (if different from Service addr):	3.05		
Contact Phone #:	Last-4 of Social S	Security #:	
Date of Birth: Hea	d of Household Name:		
TYPE OF SERVICE ~ check one			
	lband/Internet Bundle t minimum requirements)	☐Wire	eless/Sprint
NOTE: Customers receiving Lifeline assistance are before they can transfer the benefit to another profor broadband/Internet.	required to remain with their s vider – there is a 60-day "port f	service provider for a reeze" for voice servi	a minimum period ice, and 12 months
Transferring your benefit: If you are currently rec Lifeline discount with this application, please initia		ovider and you wish t	to transfer your
My current Lifeline service is not subject to existing discount with another provider to my Swidescribed in this application, understanding only of	ftel Communications account, s	ubject to all terms an	d conditions
ELIGIBILITY Check all programs you, a dependent or an if your household would like to qualify base Medicaid (not Medicare) Supplemental Security Income (SSI) Federal Public Housing Assistance SNAP (Supplemental Nutrition Assistance) Veteran's Pension, or Survivor's Pension,	sed on income. -not regular Soc. Sec. stance Program) ision ds can qualify if	Income Limit; 135% of FPG \$16,038 \$21,627 \$27,216 \$32,805 \$38,394 \$43,983 \$49,586 \$55,202	Household Size 1 person 2 3 4 5 6 7

NOTE: **Proof of program participation or income will be required to qualify.** We are required to retain a photocopy of the verification provided. Examples include a copy of your benefit ID card, eligibility letter from the authorizing agency or the prior year's statement of benefits.

Sources of income verification include prior year's tax return, three months of paychecks from all employers, or benefit statements from retirement and/or pension plans.



Lifeline Assistance Application Use this form Dec 2016-Dec 2017

Please read the following statements, initial by each statement, and sign at the end.	
I acknowledge that providing false or fraudulent statements to receive Lifeline benefits is punishable by law and can result in fines, imprisonment, de-enrollment or beir barred from the program.	ıg
I affirm that the information contained in this application and certification form is true and correct to the best of my knowledge.	
I certify that I meet the program- or income-based eligibility criteria for receiving Lifeline, as provided for in 47 C. F. R. Section 54.409 and that I have provided any required documentation of eligibility.	d
I understand that my household can only receive one Lifeline service and, to the best of my knowledge, my household is not already receiving a Lifeline service benefit.	st
I certify that the individual named on the documentation provided, demonstrating program-based eligibility, if not me, is part of my household.	
I understand that Lifeline is a non-transferable benefit and that I may not transfer is another person.	t to
I certify that if I move to a new address, I will provide that new address to Swiftel Communications within 30 days.	
I certify that I will notify Swiftel Communications within 30 days if, for any reason, no longer satisfy the criteria for receiving Lifeline support, if I am receiving more than one Lifeline benefit, or if another member of my household is receiving a Lifeline benefit.	
I acknowledge that I may be required to re-certify my continued eligibility for Lifeli at any time, and my failure to re-certify as to my continued eligibility will result in deenrollment and the termination of my Lifeline benefits pursuant to 47 C. F. R. Section 54.405(e)(4).	ne
I understand that information from this application will be given to USAC and/or its agents for purpose of verifying that my household does not receive more than one benefit and that USAC may require additional information in order to verify my eligibility.	
(Only if applicable) I understand if I provided a temporary residential address for the application, I will be required to verify my temporary residential address every 90 days.	nis
My signature below states that all information provided in this application is true and correct best of my knowledge.	to the
Signature Date	
Print Name	



Consent to Provide Lifeline Subscriber Information to the National Lifeline Accountability Database (NLAD)

Use this form Dec 2016-Dec 2017

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

Under federal law, Swiftel Communications is required to check this database prior to signing up Lifeline subscribers and is also required to provide the following information to the federal database's administrator:

- The Lifeline subscriber's full name;
- The Lifeline subscriber's full residential address;
- The Lifeline subscriber's date of birth:
- The last for digits of the Lifeline subscriber's Social Security Number or Tribal Identification 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; and
- The means through which the subscriber qualified for Lifeline service (program or income-based: Medicaid, SNAP, etc.)

The above information related to your Lifeline service is being provided by Swiftel Communications to 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.

If the National Lifeline Accountability Database indicates you already receive a Lifeline benefit, Swiftel will be required to deny the benefit to your account.

Authorization:

I, the Lifeline applicant/subscriber acknowledge that Swiftel Communications will transmit to the administrator of the federal National Lifeline Accountability Database the above-referenced information about my Lifeline account and 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 refusal or failure to provide this consent to release my Lifeline account and service information to the administrator for inclusion in the federal National Lifeline Accountability Database will result in a denial of or de-enrollment from Lifeline service.

Signature	Date signed	



Lifeline Household Worksheet

Use this form Dec 2016-Dec 2017

Lifeline Program support is a federal benefit that provides a monthly discount on home phone (i.e. landline phone) or cell phone service. Only one Lifeline Program-supported service per household is allowed under Federal law. Answer the questions on the back of this page to determine if there is more than one household living at your address, and if your household already receives a Lifeline Program benefit.

Providing false information on this form may result in losing your Lifeline Program-supported service and possible criminal penalties.

Your household is everyone who lives together at your address and contributes to, or shares in, the income and expenses of the household. Household expenses include food, health care expenses, and the cost of renting or paying a mortgage on your place of residence and utilities. Income includes salary, public inheritances, alimony, child support payments, worker's compensation benefits, gifts, and lottery winnings.

Members of a household are not permitted to receive more than one Lifeline Program-supported service. You are receiving a copy of this form because records indication that more than one person at this address is receiving a Lifeline Program benefit. Each person at this address who receives a Lifeline Program benefit and has not yet completed and returned a household worksheet will receive a copy of this form pre-populated with his/her name, address and telephone number.

If you DO NOT share income and expenses with the other adult(s) living at this address who receive Lifeline Program benefits, or there are no other adult(s) living at this address receiving Lifeline Program benefits, you MUST STILL sign this form to continue to receive your Lifeline Program benefit. If you fail to do so, you will be de-enrolled from your Lifeline Program benefit.

If you live with another adult(s) who shares income and expenses with you and who has a Lifeline Program benefit on his/her phone service, your household is receiving more than one Lifeline Program benefit. If so, you MUST take the following steps: 1) consult with the other adult(s) in your household currently receiving a Lifeline Program benefit and decide who will keep the Lifeline Program benefit, AND ONLY THAT PERSON will fill out the form IN FULL and return it to his/her telephone service provider within 30 days of the date of this communication. The telephone number listed on this form will be the number which will retain the Lifeline Program benefit.

If the PERSON IN YOUR HOUSEHOLD WHO WISHES TO KEEP THE LIFELINE PROGRAM BENEFIT FOR THE ENTIRE HOUSEHOLD HAS ALREADY PROVIDED a household worksheet to their service provider, the NO FURTHER ACTION IS NECESSARY. (The person name below does not need to sign and send this form to their Lifeline provider.)

After 30 days of the date of this letter, all other subscribers at this address below who have not completed a household worksheet will NO LONGER have a Lifeline Program benefit.

Name ~ please print			Telephone Number		
Address:	Street	City	State	ZIPcode	



Lifeline Household Worksheet

Use this form Dec 2016-Dec 2017

Please answer these questions to determine if multiple households live at your address:

	phone service? se answer question 2 below.	Yes. If YOU are the person who will keep the		
110. picu.	se unswer question 2 selow.	Lifeline benefit, check OPTION B at the bottom and sign this form. If you are not keeping your Lifeline benefit, DO NOT submit this form.		
	4			
	er adult (age 18 or older, or er counted phone service?	mancipated minor) live with you AND have a Lifeline		
No. Pleas SIGN THIS FORM.	se check OPTION A below and	Yes. Please answer question 3 below.		
	4			
		ther living expenses AND share income with the		
person in que				
SIGN THIS FORM.	e check OPTION C below and	Yes. If YOU are the person who will keep the Lifeline benefit, check OPTION B at the bottom and sign		
SIGN THIS FORM.		this form. If you are not keeping your Lifeline benefit,		
		DO NOT submit this form.		
Please check the	e box below for the one that a	applies to you:		
OPTION A []		ther than myself, is currently receiving a Lifeline		
	_	fore I may continue to receive a Lifeline Program		
OPTION B []				
	Program benefit; by signing this form, I will be the only member of this household to continue to receive a Lifeline Program benefit.			
OPTION C []		reside at the above listed address who receive a		
	Lifeline Program benefit but do not share income and expenses with me,			
therefore since I am the only member in my household receiving a Lifeline				
	Program benefit, I may cor	ntinue to receive that benefit.		
household requiren	nent is against the Federal Commı	nd correct. I understand that violating the one-per- inication Commission's rules and I may lose my Lifeline ed States government for violating the rules.		
Signature		Date		

Wireline: Ad placed in Brookings Register and local 'shopper'.





Wireless: Ad placed in local paper, shopper, etc. for each store (Brookings, Watertown, Sioux Falls).





Account Number: Billing Date:

06/21/2016

BROOKINGS SD 57006-:

Previous Balance
Jun 15 Online Payment
Balance Forward

Service Summary

Recurring Charges One Time Long Charges Distance Taxes and Surcharges

Total

Fiber Trio (605)692-

Subtotal

Charge Detail

Bundled Services

Description

Quantity Amount

Recurring Charges Jun 21 to Jul 20 Fiber Trio - Main Attraction HD

Caller ID - Call Waiting
Caller ID Name/Number
Call Forwarding
Call Waiting
Fiber Res Line Access
Per Call Block
Three Way Calling
SwiftelNet 20/5 MBPS
DVR Service
Expanded Basic Video
HD Access
Video Stream Equip
Video Stream Equip+

Taxes and Surcharges

* Video Stream Equip++

Federal Tax South Dakota State Tax Brookings City Tax Enhanced 911 SD Communication Impaired Fund Video Franchise Surcharge

Total Taxes and Surcharges

SUBTOTAL FOR Fiber Trio - Main Attraction HD

(605) 692-

Description

Quantity

Amount

Taxes and Surcharges

Federal Tax
South Dakota State Tax
Brookings City Tax
Federal USF Charge
End User Residential
Access Recovery Charge - Residential

Total Taxes and Surcharges

LONG DISTANCE PROVIDER

Intralata Pic: Swiftel Long Distance Interlata Pic: Swiftel Long Distance

SUBTOTAL FOR (605) 692-2307

Annual Lifeline Msg

Swiftel Communications is authorized to provide the Lifeline telephone assistance program that was developed in response to concerns about the affordability of telephone service for low-income citizens.

* The Lifeline program provides reduced monthly charges to telephone subscribers who qualify.

The person applying for assistance must have telephone service in their name, and must participate in at least one of the following public assistance programs:

- SNAP (formerly Food Stamps)
- National School Lunch free lunch program
- Medicaid
- Temporary Aid to Needy Families (TANF)
- Low Income Home Energy Assistance
- Federal Public Housing Assistance
- Supplemental Security Income (SSI)

OR - Household income is at or below 135% of Federal Poverty Guidelines

WHAT DOES THE PROGRAM PROVIDE?

Lifeline provides eligible subscribers with a monthly credit of \$9.25 on their basic home telephone service charges.

If you meet eligibility requirements, you may pick up an application form at Swiftel Communications, 415 4th St, Brookings.

If you no longer participate in any of the qualifying programs, you are no longer eligible for Lifeline. You are obligated by law to notify Swiftel Communications of the change.

If you have questions about Lifeline, contact Swiftel Communications at 605-692-6211 for more information.

printed on all bills



Swiftel NOISE VIDEO - DATA - SPRINT

Account Number: Billing Date:

1

06/21/2017

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BROOKINGS SD 57006

Service Summary					
	Recurring Charges	One Time Charges	Long Distance	Taxes and Surcharges	Total
(605)697-	18.00	108.59	0.00	31.79	158.38
Internet	33.95	28.47	0.00	4.06	66.48
Subtotal	\$51.95	\$137.06	\$0.00	\$35.85	\$224.86

Total Recurring Charges Partial Charges May 26 to Jun 20

Res 1YR FiberNet15

Total Partial Charges

Res 1YR FiberNet15

Taxes and Surcharges South Dakota State Tax Brookings City Tax Total Taxes and Surcharges

SUBTOTAL FOR INTERNET CHARGES

.

Charge Detail

One Time Charges

Description	Quantity	Amount
(605) 697-		
Install of Res Fiber Internet	1	\$75.00
Order Charge	1	\$12.00
Programming Charge	1	\$6.50
Taxes and Surcharges		
South Dakota State Tax		\$4.21

Total One Time Charges \$99.58

(605) 697-

Brookings City Tax

Total Taxes and Surcharges

Description Recurring Charges Jun 21 to Jul 20 Fiber Res Line Access w/FiberNet Call Forwarding Call Waiting Three Way Calling Total Recurring Charges	Quantity 1 1 1 1	Amount \$18.00 \$0.00 \$0.00 \$0.00 \$18.00
Partial Charges May 26 to Jun 20 Fiber Res Line Access w/FiberNet Call Forwarding Call Waiting Three Way Calling Total Partial Charges		\$15.09 \$0.00 \$0.00 \$0.00 \$15.09
Taxes and Surcharges Federal Tax South Dakota State Tax Brookings City Tax Enhanced 911 Federal USF Charge SD Communication Impaired Fund End User Residential Access Recovery Charge - Residential Total Taxes and Surcharges		\$1.35 \$2.03 \$0.90 \$2.50 \$2.08 \$0.30 \$11.95 \$4.60 \$25.71
LONG DISTANCE PROVIDER Intralata Pic: NO PIC W/ Casual Dialing & Op Interlata Pic: NO PIC W/ Casual Dialing & Op		

Internet Charges

SUBTOTAL FOR (605) 697-

Description Quantity Amount
Recurring Charges Jun 21 to Jul 20

TO ALL SWIFTEL CUSTOMERS:

If you participate in any of the assistance programs listed below, you qualify for the lifeline discount on your Swiftel monthly bill.

- -SNAP (formerly Food Stamps)
- -Federal Housing Assistance
- -Medicaid

\$1.87

\$6.08

\$58.80

- -Supplemental Security Income (SSI)
- -Veteran's Pension, or Survivor's Pension

Or, household Income-Based Eligibility if income is at or below 135% of the Federal Poverty Guidelines.

For more information, or to apply, contact Swiftel's customer service office at 415 4th St, 692-6211.

printed on accounts' first bill statement

Postcard sent to new Sprint/wireless customers.

Swiftel Communications/Sprint P.O. Box 588 Brookings, SD 57006



Thank you for choosing Sprint!

As an eligible telecommunications carrier in South Dakota we are required to inform you of the availability of the following program:

LIFELINE

Lifeline is a public assistance program that provides a discount on wireless telephone service to qualified, low income consumers.

Under the Lifeline program, eligible subscribers receive a monthly discount.

People currently participating in at least one of the programs listed below qualify for Lifeline.

- Medicaid (e.g. Title XIX/Medical, State Supplemental Asst.)
- Supplemental Nutrition Assistance Program (SNAP)
- Supplement Security Income (SSI)
- Federal Public Housing Assistance
- Veteran's Pension, or Survivor's Pension

You may also qualify if you are at or below 135% of the Federal Poverty guidelines.

You will be asked to list the number of individuals in your household and must provide documentation of one of the following:

- A copy of a prior year's state, federal or tribal tax return
- Three consecutive months of income statements or paycheck stubs from your employer
- A Social Security statement of benefits
- A Veterans Administration statement of benefits
- A retirement/pension statement of benefits
- An Unemployment/Workmen's Compensation statement of benefits
- A Divorce decree or child support document

For further information about Lifeline assistance or to receive an application form, please call 605-692-6211 or go to your local South Dakota Sprint Store.

Swiftel Communications

they have no further responsibility if you continue to make substantially the same allegation.

You cannot be charged for a billing review.

The amount still due on your billing account needs to be paid in full. Your local company, or the long-distance company providing the pay-per-call service, may take action to collect the amount outstanding if you continue to withhold payment once the billing review is done.

Failure to pay the amount outstanding may subject you to collection action, including being reported to a collection agency or credit bureau. If you continue to dispute any portion of your billing error claim, your telephone company will include it and identify the disputed amount to the collection agency or credit bureau. Your company will attempt to inform you if your account is turned over for collection and to what agency it will be sent. If the dispute is resolved, that fact will be reported to all who received notice that the account was delinquent.

If your billing entity, or the long-distance company involved, fail to follow the billing and collection procedures prescribed by Section 308.7 of the Federal Trade Commission rule implementing the TDDRA, they are obligated to forfeit any disputed amount, up to \$50 per transaction.

DISCLOSURE UNDER FCC RULE 64.1509(b)
The FCC requires the following disclosures to telephone subscribers:

Your local exchange and long-distance service cannot be disconnected or interrupted as a result of your failure to pay charges for interstate pay-per-call services, charges for interstate information services provided pursuant to a presubscription or compatible arrangement, or charges you have disputed for interstate tariffed collect information services.

You can obtain blocking of access to 900# services where it is technically feasible, at no charge, on a one-time basis.

You have a right not to be billed for pay-per-call services offered which are not in compliance with Federal laws and regulations established under Titles II or III of the TDDRA.

Your access to pay-per-call services may be involuntarily blocked for failure to pay legitimate pay-per-call charges.

Contact your local telephone company's business office with questions about pay-per-call charges or to request a 900# block.

<u>LIFELINE/LINK-UP DISCOUNT INFORMATION</u>
Swiftel Communications customers who qualify may be eligible for monthly telephone service discounts, and a discount on the telephone hook-up charges.

Participation in one or more of the following assistance programs qualifies you for the Lifeline and /or Link-Up discount: Food Stamps, Public Housing Assistance, Low-Income Home Energy Assistance, Medicaid, SSI, TANF, National School Free Lunch Program, or if your household income is at or below 135% of the Federal Poverty Guidelines.

Contact Swiftel Communications at 692-6211 for more details.

TELEPHONE SERVICES FOR HEARING & SPEECH IMPAIRED USA RELAY S.D.

711 or Toll Free 1-800-877-1113

Questions or Additional Information **Toll Free 1-800-642-6410**

COMMUNICATION SERVICE FOR THE DEAF

If you require assistance using the telephone system due to a hearing or speech impairment, or need to communicate with someone who has such an impairment, contact Communication Service for the Deaf. They are equipped with TDDs (Telecommunication Devices for the Deaf) and provide service. For information on Voice Carry-Over and Hearing Carry-Over services, call 1-800-642-6410. To contact and use the USA Relay for call processing, call 711 or 1-800-877-1113.

Brookings Police and Fire (911) as well as the Brookings County Sheriff's Office (rural 911) are equipped to handle Emergency and Non-Emergency Calls with TDDs.

HOW TO HANDLE ANNOYANCE CALLS

It is against the law in the state of South Dakota to make an obscene, harassing or threatening telephone call. When you receive such a call, follow these suggestions:

- When answering your telephone, say "hello" twice. If no answer, HANG UP.
- 2. Do not give information until you are absolutely certain you know who is speaking.
- 3. Instruct children not to give any information to strangers over the phone.
- Hang up when you hear something off-color or obscene. Never reveal you are alone.
- 5. When annoyance calls persist, contact your local law enforcement agency.
- Calls of a threatening nature should be reported to the local law enforcement agency immediately.
- Customer-Originated Trace is another available service.

CUSTOMER ORIGINATED TRACE

When you are serious about prosecuting an offender, Call Trace lets you automatically trace an obscene or threatening phone call and delivers the number to local law enforcement. If the caller has violated South Dakota Codified Law 49-31-31 and you decide to prosecute, the police may use the trace as evidence.

Note: Every time you complete a call trace, you will be charged, whether or not you follow up with authorities. The traced number will be delivered ONLY to law enforcement.

- 1. Automatically available on every line at no charge, unless you use it.
- 2. If you receive a call that you would like to trace:
 - · Hang up.
 - Dial *57 (Rotary 1157).
 - You will hear an announcement: You have accessed the Call Trace Feature. Cost for a successful trace is \$4.00.
 - To discontinue the trace, hang up.
- To continue the trace, dial 1. You will hear an announcement telling you that your trace has been successful and to call local law enforcement for further assistance.

UNLAWFUL WIRETAPPING MAY BE SUBJECT TO PROSECUTION

Under federal and state laws, it is a crime for any person to wiretap or otherwise intercept a telephone call without the consent of one or both parties actually participating in the call. When proceeding under court orders, authorized law enforcement officers can take part in interception without the consent of either party. The penalty for illegal wiretapping is imprisonment and/or a fine.

USE OF TELEPHONE FOR DEBT COLLECTION PURPOSES

The Federal Communications Commission has received information that interstate telephone service is being used for collection of claimed debts in violation of tariffs of the telephone companies and criminal statutes. Practices alleged include calling at odd hours of the day or night; repeated calls; calls to friends, neighbors, relatives, employers, and children; calls making a variety of threats; calls asserting falsely that credit ratings will be hurt; calls falsely stating that legal process is about to be served; calls demanding payments for amounts not owed; calls to places of employment, and calls misrepresenting the terms and conditions of existing or proposed contracts. Tariffs of the telephone companies forbid use of the telephone "for a call or calls" expected to frighten, abuse, torment, or harass another, or for calls that interfere unreasonably with the use of the service by one or more other customers, or for calls for "unlawful purpose". Upon violation of any of these conditions, the telephone company can, by written notice, discontinue service immediately. These tariff regulations are filed with this Commission pursuant to Section 203 of the Communications Act, 47 U.S.C. 203, and are binding on the telephone company and customer alike. (Rules & regulations referenced in this directory are subject to change. For the most current information, contact the FCC at 1-800-CALL-FCC or http://www.fcc.gov; OR SD PUC Office of Consumer Affairs, 1-800-332-1782 or http://www.state.sd.us/puc)

"Do Not Call" SIGN-UP

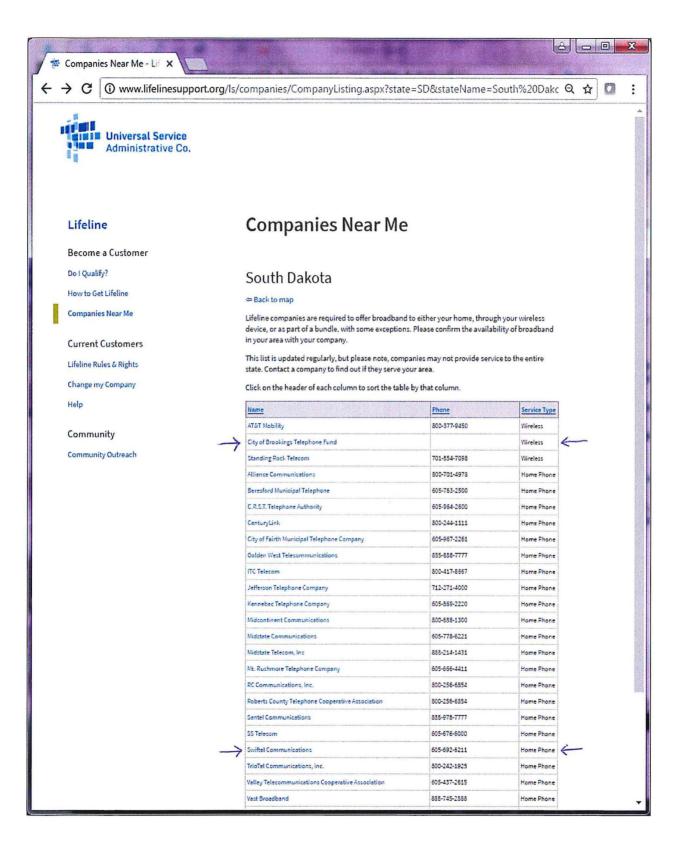
South Dakota consumers may sign up to stop most telemarketing calls. The sign-up is free and consumers have two ways to register their home telephone and personal cell phone numbers:

- Call 1-888-382-1222 from the home or personal cell phone you wish to be registered; or
- 2. Register via Internet at www.donotcall.gov for wireline and/or wireless phones.

Consumers can register just once to be covered by both the national and state Do Not Call lists. South Dakotans can register complaints with the PUC at 1-800-332-1782.



www.swiftel.net 605-692-6211





415 4th St PO Box 588 Brookings, SD 57006-0588 605-692-6211

Outreach Guidelines 2016 Lifeline Programs

List of places we will ask to display Lifeline posters and brochures (not all-inclusive):

- Women's shelter
- Nursing homes
- Free-Meal places (Churches, Soup Kitchens, etc.)
- Food Pantry
- Sr. Housing/Assisted Living facilities
- · Sr. Center
- SD Social Services office
- · Federal Housing office
- Apartment-rental offices
- County Welfare office
- Advance office and apartments (disabled persons assistance org)
- VFW/American Legion lodges

Ideas on other methods of sharing this information:

- Include in back-to-school, and new-student, packets (public schools)
- Request an item in public school newsletters
- Have Public Service Announcements on/in:
 - radio/TV
 - Register (local newspaper)
 - Collegian (SDSU campus newspaper)
- On SD State University campus:
 - Fall registration freebie-bags
 - Student Union
 - Financial Aid office
 - One-Stop Career Center



Assistance for Basic Home Telephone Service

Lifeline is a public assistance program offering wireline telephone discounts to qualified, low-income consumers. Under the **Lifeline** program, eligible subscribers receive a discount on their monthly service.

Eligibility requirements vary by state. You may qualify for **Lifeline** assistance if you comply with certain income level requirements or you currently participate in certain public assistance programs. Linfeline assistance is available for one phone line per household

Lifeline subscribers may also receive long distance blocking on their telephone free of charge.





For further information about Lifeline assistance or to receive an application form, please call or visit your local store.





Assistance for Basic Home Telephone Service

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Eligibility requirements vary by state. You may qualify for **Lifeline** assistance if you comply with certain income level requirements or you currently participate in certain public assistance programs. Linfeline assistance is available for one phone line per household

Lifeline subscribers may also receive long distance blocking on their telephone free of charge.

See other side for how to qualify.





605-692-6211 415 Fourth Street Brookings, SD 57006

How to qualify for the Lifeline discount.

- 1. Participation in at least one of the following programs -
 - Medicaid

 (e.g., Title XIX/Medical, State Supplemental Asst)
 - Food Stamps
 - Supplement Security Income (SSI)
 - Federal Public Housing Assistance
 - Low-Income Home Energy Assistance (LIEAP)
 - Temporary Assistance to Needy Families (TANF)
 - National School Lunch's Free Lunch Program (NSL)
- 2. Qualify by household income level -Income must be at or below 135% of the Federal Poverty guidelines. You will be asked to list the number of individuals in your household. In order to qualify under this criterion, you must provide documentation of income eligiblity. Documentation may consist of a copy of a prior year's state, federal or tribal tax return, three consecutive months of income statements or paycheck stubs from your employer, a Social Security statement of benefits, a Veterans Administration statement of benefits, a retirement/ pension statement of benefits, an Unemployment/ Workmen's Compensation statement of benefits, federal or tribal notice letter of participation in Bureau of Indian Affairs General Assistance, a divorce decree or child support document.

For further information about

Lifeline assistance

or to receive an application form, please call



Wireline brochure





Lifeline is a public assistance program offering wireline telephone discounts to qualified, low-income consumers. Under the **Lifeline** program, eligible subscribers receive a discount on their monthly service.

Eligibility requirements vary by state. You may qualify for **Lifeline** assistance if you comply with certain income level requirements or you currently participate in certain public assistance programs. Linfeline assistance is available for one phone line per household

Lifeline subscribers may also receive long distance blocking on their telephone free of charge.





For further information about Lifeline assistance or to receive an application form, please call or visit your local store.



Lifeline is a public assistance program offering wireless telephone discounts to qualified, low-income consumers. Under the **Lifeline** program, eligible subscribers receive a discount on their monthly service.

Lifeline subscribers may purchase a reduce-cost PCS **Lifeline** phone. **Lifeline** assistance is available for one phone line per household.

Eligibility requirements vary by state. You may qualify for **Lifeline** assistance if you comply with certain income level requirements or you currently participate in certain public assistance programs.

See other side for how to qualify.





Wireless brochure
Our 5 retail locations

How to qualify for the Lifeline discount.

- Participation in at least one of the following programs -
 - Medicaid
 (e.g., Title XIX/Medical, State Supplemental Asst)
 - Food Stamps
 - Supplement Security Income (SSI)
 - Federal Public Housing Assistance
 - Low-Income Home Energy Assistance (LIEAP)
 - Temporary Assistance to Needy Families (TANF)
 - National School Lunch's Free Lunch Program (NSL)
- 2. Qualify by household income level -Income must be at or below 135% of the Federal Poverty guidelines. You will be asked to list the number of individuals in your household. In order to qualify under this criterion, you must provide documentation of income eligiblity. Documentation may consist of a copy of a prior year's state, federal or tribal tax return, three consecutive months of income statements or paycheck stubs from your employer, a Social Security statement of benefits, a Veterans Administration statement of benefits, a retirement/ pension statement of benefits, an Unemployment/ Workmen's Compensation statement of benefits, federal or tribal notice letter of participation in Bureau of Indian Affairs General Assistance, a divorce decree or child support document.

For further information about

Lifeline assistance

or to receive an application form, please call



605-697-8818

415 Fourth Street, Brookings



605-367-6670

2422 Louise Av, Sioux Falls

605-275-0222

1524 S Sycamore, Sioux Falls



305-886-0951

107 9th Ave SE Watertown



266-8899

4115 Gordon Dr, Sioux City