TO BE COMPLETED BY THE REPORTING CARRIER.

						0.1	
Certification of Officer as to the Accuracy of the CAF ICC Data Reported							
I certify that I am an officer of the reporting can and, to the best of my knowledge, the informati			e accuracy of the act	ual data reported;			
Name of Reporting Carrier: GOLDE	N WEST TELECO	OM COOP (UNION	1)				
Dennis Law Signature of Authorized Officer:			Digitally signed by Dennis Law DN:cn=Dennis Law,email=dennylaw@goldenwest.com,O=golden west telecom coop (union),I=Wall SD 57790-0411, Date:5/20/2019			5/20/2019	
olgitatare of Authorized Officer.			Date.3/20/2019				
Printed name of Authorized Officer:	Dennis Law						
Title or position of Authorized Officer:	General Manage	er/CEO					
Telephone number of Authorized Officer:	605-279-2161						
Study Area Code of Reporting Carrier	391684	Filing Due form (mm/	Date for this dd/yyyy)	6/17/2019			
				der the Communications Act of 19 s Code, 18 U.S.C. § 1001.	34,		

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

Certification of Officer to Authorize an Agent to File Data Reported on Behalf of Reporting Carrier						
I certify that (Name of Agent) National Exchange Carriers Association, Inc. Is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the data provided to the Authorized Agent; and, to the best of my knwoledge, the actual data provided to the Authorized						
Agent is accurate.	Authorized Agent, und, to the	best of my	Killioleage, the actual data provided	to the Authorized		
Name of Authorized Agent:	National Exchange Ca	rriers Asso	ociation, Inc.			
Name of Reporting Carrier: GOLDEN WEST TELECOM COOP (UNION)						
Signature of Authorized Officer:	Digitally signed by Dennis Law DN:cn=Dennis Law,email=dennylaw@goldenwest.com,O=golden west telecom coop (union),I=Wall SD 57790-0411, Date:5/20/2019			Date:	5/20/2019	
Printed name of Authorized Officer:		Dennis La	w			
Title or position of Authorized Officer: General Manager/CEO						
Telephone number of authorized officer: 605-279-2161						
Study Area Code of Reporting Carri	er 391684		Filing Due Date for this form (mm/dd/yyyy)	6/17/2019		
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.						

TO BE COMPLETED BY AN OFFICER OF THE REPORTING CARRIER

Certification of Officer for Rate-of-Return Carrier Eligibility for CAF/ICC Recovery							
I certify that I am an officer of the reporting carrier and that, to the best of my knowledge, the reporting carrier on this form certifies that it has complied with Eligible Recovery §51.917(d) and Access Recovery Charge §51.917(e) and is eligible to receive the CAF ICC support requested pursuant to §51.917(f).							
Name of Reporting Carrier: GOLDEN WEST TELECOM COOP (UNION)							
Dennis Law			Digitally signed by Dennis Law DN:cn=Dennis Law,email=dennylaw@goldenwest com,O=golden west telecom coop (union),1=WBI SD 5779-0-0411,				
Signature of Authorized Officer or employee: Date:5/20/2019					Date:	5/20/2019	
Printed name of Authorized Officer or employee: Dennis Law							
Title or position of Authorized Officer or employee: General Manager/CEO							
Telephone number of Authorized Officer or employee: 605-279-2161							
Study Area Code of Reporting Carrier	391684	Contract of the Contract of th	ue Date for this m/dd/yyyy)	6/17/2019			
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.							

TO BE COMPLETED BY AN OFFICER OF THE REPORTING CARRIER

Certification of Officer for Rate-of-Return Carrier Not Seeking Duplicative Recovery							
I certify that I am an officer of the reporting carr duplicative recovery in the state jurisdiction for							
duplicative recovery in the state jurisdiction for	any Engible Recove	ry subject to the rec	overy mechanism as pe	a goriori/(u)(vii).			
Name of Reporting Carrier: GOLDE	N WEST TELEC	OM COOP (UNI	ON)				
Digitally signed by Dennis Law DN:cn=Dennis Dennis Law Law,email=dennylaw@goldenwest.com,0=golden west							
			telecom coop (union),I=Wall SD 57790-0411,			E/20/2010	
Signature of Authorized Officer or employee: Date: 5/20/2019 Date: 5/20/2019							
Printed name of Authorized Officer or employe	ee: De	ennis Law					
Title or position of Authorized Officer or employee: General Manager/CEO							
Title or position of Authorized Officer or emplo	yee.	General Manage	IIICEO				
Telephone number of Authorized Officer or employee: 605-279-2161							
Study Area Code of Reporting Carrier	391684	Filing D	ue Date for this	6/17/2019			
Study Area Code of Reporting Carrier	331004	form (m	mm/dd/yyyy)	0/1//2019			
Persons willfully making false	statements on this fo	orm can be punished	by fine or forfeiture un	der the Communications Act of 1	934.		
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.							