

**Glenwood Telecommunications, Inc.**  
**Heartwell**  
**Attachment M\_3 – Community Engagement Forms**

**Capital Projects Fund  
Community Feedback Form**

**PROJECT DETAILS**

Applying Service Provider: Glenwood Telecommunications, Inc.

Project Name: Heartwell

Description of Proposed Project Area:

\*Please refer to page 3 for map of proposed project area.

Name of person/entity completing the form: 

Community Role (mark one):

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Community Member                       | <input type="checkbox"/> Local Business: _____   |
| <input checked="" type="checkbox"/> Local Government: <u>Village Board</u> | <input type="checkbox"/> Local Nonprofit: _____  |
| <input type="checkbox"/> Tribal Government: _____                          | <input type="checkbox"/> Other (describe): _____ |

I/We DO NOT support the providers application because:

**I/We support the provider's application because (select any that apply):**

- The proposed service area is not able to receive reliable broadband service of 25/3 Mbps or greater.
- The proposed service area is not able to receive reliable broadband service of 100/20 Mbps or greater.
- The proposed project would result in the entire community having access to high-speed internet at 100/100 Mbps.
- The proposed service provider has consulted with the community in relation to community needs and affordability of the proposed service plans.
- Other reasons (please complete below)

**Comments:**

Please feel free to include supplemental information regarding the proposed project as attachments to this form.

More information about the Capital Projects Fund grant program or the Nebraska Broadband Bridge Program, including a map and an electronic version of this form, can be found on the Nebraska Public Service Commission (PSC) website at: <https://psc.nebraska.gov/telecommunications/nebraska-broadband-bridge-program-nbbp>.

If you have questions regarding the Capital Projects Fund grant program, please e-mail [psc.broadband@nebraska.gov](mailto:psc.broadband@nebraska.gov) or you may contact the Nebraska Public Service Commission Consumer Advocate during regular business hours (Monday-Friday, 8:00 a.m.-5:00 p.m. CT) by calling 402-471-3101 or toll free in Nebraska at 1-800-526-0017.

Name: Dana Pedewitz Date: 1-9-2024  
Signature: 

Please return completed feedback forms and any supplemental information **no later than March 27, 2024**, via e-mail to [psc.broadband@nebraska.gov](mailto:psc.broadband@nebraska.gov) or via mail to 1200 N Street, 300 The Atrium, Lincoln, NE 68508.

**Capital Projects Fund  
Community Feedback Form**

**PROJECT DETAILS**

Applying Service Provider: Glenwood Telecommunications, Inc.

Project Name: Heartwell

Description of Proposed Project Area:

\*Please refer to page 3 for map of proposed project area.

Name of person/entity completing the form: Chris Hopkins

Community Role (mark one):

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Community Member                       | <input type="checkbox"/> Local Business: _____   |
| <input checked="" type="checkbox"/> Local Government: <u>Village Board</u> | <input type="checkbox"/> Local Nonprofit: _____  |
| <input type="checkbox"/> Tribal Government: _____                          | <input type="checkbox"/> Other (describe): _____ |

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Name: Chris Hopkins Date: 1-9-24  
Signature: Chris Hopkins

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**PROJECT DETAILS**

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Project Name: Heartwell

Description of Proposed Project Area:

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Name of person/entity completing the form: 

Community Role (mark one):

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Community Member | <input type="checkbox"/> Local Business: _____   |
| <input type="checkbox"/> Local Government: _____     | <input type="checkbox"/> Local Nonprofit: _____  |
| <input type="checkbox"/> Tribal Government: _____    | <input type="checkbox"/> Other (describe): _____ |

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Name: \_\_\_\_\_ Date: 1/9/2024  
Signature: \_\_\_\_\_

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**Capital Projects Fund  
Community Feedback Form**

**PROJECT DETAILS**

Applying Service Provider: Glenwood Telecommunications, Inc.

Project Name: Heartwell

Description of Proposed Project Area:

\*Please refer to page 3 for map of proposed project area.

Name of person/entity completing the form: Lacy Fredrickson

Community Role (mark one):

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Community Member                       | <input type="checkbox"/> Local Business: _____   |
| <input checked="" type="checkbox"/> Local Government: <u>Village Board</u> | <input type="checkbox"/> Local Nonprofit: _____  |
| <input type="checkbox"/> Tribal Government: _____                          | <input type="checkbox"/> Other (describe): _____ |

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Name: Lacey Fredrickson Date: 1-9-2024  
Signature: Lacey J. Fredrickson

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### PROJECT DETAILS

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Project Name: Heartwell

Description of Proposed Project Area:

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Name of person/entity completing the form: Lori Withwer

Community Role (mark one):

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Community Member                       | <input type="checkbox"/> Local Business: _____   |
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Name: Lon Withwer Date: 11/9/2024  
Signature: Lon Withwer

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\*Pg. 3 – Map of Proposed Project Area.

