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Required Cover Sheet for Submission of 2009 Annual ETC Recertification Reports

Filing Deadline: Wednesday, July 15, 2009

JUN 29 2009

Public Utility Commission of Oregon Administrative Hearing Division

Name of Eligible Telecommunications Carrier:	Helix Te	lephone	Company
Filing date: 6/25/09			
Is this: Original submission? OR Revised submission? I	f revised, please are being revis		hich reports
Person to contact for questions:	are come to the		
Name Jim Smith	and the state of t		RECEIVED
Phone number 541-457-2385			JUN 2 5 2009
E-mail address htc@helixtel.com			P U C Utility Program

Filing instructions: Please file reports under Docket No. UM 1426. File reports electronically via the PUC Filing Center; see the PUC website for instructions. Also send one original and 2 hard copies to the PUC Filing Center. If selected portions of reports, e.g., network improvement plans, are to receive confidential treatment, those portions should not be filed electronically. Hard copies of confidential material should be filed in accordance with confidential designation requirements described in OAR 860-011-0080. Regular delivery methods may be used to send all hard copy documents; overnight or express delivery is not necessary. Please do not send copies of advertising that does not specifically contain advertising for Basic Service or Low Income Programs. Send documents to the Filing Center using one of the two following addresses, depending on the delivery carrier used:

For US mail:

Public Utility Commission of Oregon

Attn: Filing Center PO Box 2148

Salem, OR 97308-2148

For other carriers:

Public Utility Commission of Oregon

Attn: Filing Center 550 Capitol St. NE #215 Salem, OR 97308-2148

If you have any questions on these reports, please call Kay Marinos at 503-378-6730, or Celeste Hari at 503-378-6628.

2009 Annual Recertification Reports for ETCs in Oregon

Docket No. UM 1426

Report Formats to Satisfy Requirements of Order No. 06-292 for 2009

Report #1	Supported Services Offerings 1.1. Basic Local Usage Service Offerings – All ETCs 1.2. Comparable Local Usage Plan – CETCs only 1.3. Supported Services Not Provided – CETCs only 1.4. Equal Access Acknowledgement – CETCs only
Report #2	Unfulfilled Service Requests 2.1. Unfulfilled Service Requests/Held Orders – All ETCs 2.2. Service Request Processing – CETCs only
Report #3	Evidence of Advertising for Basic Supported Services - All ETCs
Report #4	Low-income Services – All ETCs 4.1. Number of Lifeline Customers 4.2. Advertising of Low-income Program Service Offerings
Report #5	Outage Report - All ETCs
Report #6	Trouble Report - All ETCs
Report #7	Network Improvement Plan - CETCs only
Report #8	Special Commitments/Requirements - CETCs only
Report #9	Certifications – All ETCs 9.1. IAS or ICLS Certification Copy – All ETCs Receiving IAS or ICLS 9.2. Certification of Use of Universal Service Funds – All ETCs Receiving

Traditional High-Cost Support (HCL, LSS)

9.3. Certification of Emergency Functionality and Compliance with Service Quality/Consumer Protection Measures – All ETCs

Report #1 - Supported Services Offerings

1.1. Basic Local Usage Service Offerings – All ETCs

Choose either A. or B. below, as applicable:

A	Basic local usage service offerings are filed under tariff with the Oregon PUC. The specific tariff references (with <i>company name</i> , <i>tariff number</i> , <i>section and page numbers</i>) for the basic local usage offerings and corresponding rates are: 1. residence:							
	2. business:							
В. <u>х</u>	Basic local usage service offerings are not filed under tariff with the Oregon PUC. Submit the following information for each basic service offering that includes local usage allowances (unlimited or limited): 1) plan's name, 2) advertised public description, 3) number of local minutes included, 4) calling area included, and 5) rates and charges. Include basic offerings for both residence and business services.							
1.2. C	Comparable Local Usage Plan - CETCs only							
	arrier certifies that it offers at least one basic local usage plan that is comparable to offered by the ILECs in its designated service area: yes no							
	y which of the plans in 1.1.B above are "comparable" to the ILEC local usage ags, and explain the basis for the comparability.							
1.3. S	upported Services Not Provided – CETCs only							
provid incom	y any supported services that were not available at designation, but were to be ed as a condition of ETC designation (e.g., toll restriction for qualifying lower consumers, E911):							
Are the lf no, e	ese services provided currently? yes noexplain why not:							
	qual Access Acknowledgement - CETCs only							
	arrier acknowledges that it may be required to provide equal access if it is the only along ETC in an area: yes no							

Helix Telephone Company 200 Concord PO Box 326 Helix, Or 97835 541-457-2385

Office hours: 8am to 12pm Monday, Wednesday, Friday

8am to 12pm & 1pm to 5pm Tuesday and Thursday

PHONE SERVICE - 1/1/09

		Zone 1-2 Mi CO	Zone 2-6 Mi CO
Residence Basic	\$13.80	+ \$2.00	+ \$4.00
Iner SLC	6.50	same	same
Touch Tone Line	1.00	same	same
OR RSPF	.09	same	same
911	.75	same	same
Total	\$22.10	\$24.10	\$26.10
Plue to	v & Surc	harne	

Plus tax & Surcharge

Business Basic	\$16.60	Zone $1 + 2.50	Zone $2 + 5.00
Iner SLC	9.20	same	same
Touch Tone Line	1.00	same	same
OR RSPF	.05	same	same
911	.75	same	same
Tota	1 \$27.60	\$29.60	\$31.60
Plus	tax & Surcha	rge	

CALLING FEATURES

\$5.00
\$1.00
\$1.00
\$1.00
\$1.00
\$1.00
\$1.50

INTERNET SERVICE

Internet Service		\$10.00	
Mailbox		\$5.00	
Residential DSL	256 speed	\$26.00	up 128
	512 speed	\$46.00	up 128
	1024 speed	\$66.00	up 128
Business DSL	256 speed	\$46.00	up 256
	512 speed	\$66.00	up 512
	1024 speed	\$86.00	up 640
Modems	-	\$70.00	_
Modems Lease \$10/mo 7 mo		\$70.00	not available to new
			customers
Phone filter for DSL (desk) addtl		\$2.25	2 provided with modem
Phone filter for DSL (wall)		\$12.16	

Report #2 – Unfulfilled Service Requests

2.1. Unfulfilled Service Requests/Held Orders – All ETCs

Choose	either	A.	or	B.	below.	as	ap	plica	ble:

- A. ___ Service quality reports for "primary held orders over 30 days" were filed with the Oregon PUC for calendar year 2008. No additional submission is required for recertification purposes.
- B. <u>x</u> Service quality reports for "primary held orders over 30 days" were **not** filed with the Oregon PUC for calendar year 2008. In this case, choose **one** of the following alternatives for reporting:
 - X The number of customer requests for supported services that were not fulfilled during calendar year 2008: ______.
 If greater than zero, include an attachment noting for each such request, the location (address) of the request and a description of attempts to provide service.
 - X The number of "primary held orders over 30 days" (as defined in Section 860-034-0390 of the Oregon Commission rules) for calendar year 2008: _______.
 If greater than zero, include attachment noting for each such held order, the reason the order was held and the original commitment date.

2.2. Service Request Processing - CETCs only

Submit a description of how the carrier ensures that every request for service that cannot be immediately fulfilled is recorded and processed under the 6-step process set forth in 47 CFR Section 54.202(a)(1)(i).

Report #3 — Evidence of Advertising for Basic Supported Services (excluding low-income/lifeline) — All ETCs

Describe how basic supported services were advertised during calendar year 2008 throughout the designated service area. List the types of media used, advertising frequencies and geographic coverage. Attach examples of actual advertisements, noting dates, specific distribution methods, and target geographical populations, sufficient to demonstrate that basic supported services and rates were advertised **throughout** the designated service area in 2008.

Advertisement is displayed in Post Office.

Advertisement

HELIX TELEPHONE COMPANY

Helix Telephone Company is a quality telecommunications services provider who provides basic and enhanced services at reasonable rates within its service territory. Basic services are offered at the following rates:

Monthly Charge

Services Offered	Residence	<u>Business</u>				
Single-Party	\$13.80	\$16.60				
Federal Subscriber Line Charge single line \$6.50						
Federal Subscriber Line Charge Business multi-line \$9.20						
Directory Assistance no additional charge by Helix Telephone Company						
Touch Tone Service \$1.00 \$1.00						
Toll Blocking Available at no charge for low-income customers that qualify.						
	urcharges for 911 services are a overnment assessments.	ssessed according to				

Low-income individuals eligible for Lifeline and Link-Up telephone assistance programs may be eligible for discounts from these basic local service charges through state specified telephone assistance plans.

Basic services are offered to all consumers in the Helix Telephone Company Service territories at the rates, terms and conditions specified in the Company's tariffs. If you have any questions regarding the Company's services, please call us at 541-457-2385, or visit our business office at 200 Concord, Helix, Oregon for further information regarding our services.

Report #4 - Low-income Services - All ETCs

4.1. Number of Lifeline Customers - All ETCs

customers receiving Li e designated service a	feline discounts during the month of rea:4
CETCs only - also l	ist counts by ILEC service area as follows:
ILEC Svc Area	No. of Lifeline customers
#16-04	

4.2. Advertising of Low-Income Program Service Offerings - All ETCs

Submit copies of all advertisements (for all media) for Lifeline, LinkUp, and OTAP service offerings that were run during calendar year 2008, noting media (newspaper name, radio station, bill inserts, internet postings, etc.), run/distribution dates, and geographic coverage area.

Billing inserts for all customers in exchange 457 & 983

How do I apply to receive Lifeline, Link Up and TLS support discounts?

Contact your local telephone company. Consumers must apply for Lifeline, Link Up and TLS discounts through their local telephone company. The Universal Service Administrative Company's (USAC) web site contains state-specific Lifeline contact information for many companies at information for many companies at www.lifelinesupport.org. You also may wall USAC toll free at 1-888-641-8722 call USAC toll free at 1-888-641-8722 with any questions about Lifeline, Link wand TLS discounts.

Residents of Indian reservations or tribal lands qualify if they participate in any of the programs listed inside, have a household income that is at or below 135% of the federal poverty guidelines, or participate in one of these programs:

- Bureau of Indian Affairs (BIA) general assistance
- Head Start (income eligible)
- **TVIDal TANF**

COMMUNITY BASED TELECOM PROVIDER



don can afford

AN IMPORTANT MESSAGE FROM YOUR COMMUNITY BASED TELECOM PROVIDE

Report #5 - Outage Report - All ETCs

Choose	either	A.	or	В.	below,	as	apj	plicable:

A	Rules at for large provider	was required to report service outages (as defined in Oregon PUC Sections 860-034-0390(9) for small telecom utilities, 860-023-0055(9) et elecom utilities, and 860-032-0012(9) for competitive telecom rs) to the Oregon PUC during year 2008. No additional submission is for recertification purposes.
В	Rules at for large provider	was <i>not</i> required to report service outages (as defined in Oregon PUC Sections 860-034-0390(9) for small telecom utilities, 860-023-0055(9) te telecom utilities, and 860-032-0012(9) for competitive telecom rs) to the Oregon PUC during year 2008. Select #1 (wireline carriers) vireless carriers) below.
	1. <u>x</u>	The number of service outages, as defined in Oregon PUC rules, that occurred during calendar year 2008 was0
eat.		If the number was greater than zero, attach a report that lists for each such outage the following: the date and time of onset, a brief description of the outage and its resolution, the particular services affected, the geographic areas affected, steps taken to prevent a similar future occurrence, and the number of customers affected.
. 35	2	The number of service outages, as defined in FCC rules at 47 CFR Section 54.209(a)(2), that occurred during calendar year 2008 was
		If the number was greater than zero, attach a report that lists for each such outage the following: the date and time of onset, a brief

description of the outage and its resolution, the particular services affected, the geographic areas affected, steps taken to prevent a

similar future occurrence, and the number of customers affected.

Report #6 - Trouble Report - All ETCs

Choose <u>either</u> A. <u>or</u> B. below, as appr	ropriate:	
A Trouble reports were filed wi Oregon PUC service quality rules. No recertification purposes.	<u> </u>	•
B. X Trouble reports were not filed In this case, choose one of the following	—	ng calendar year 2008.
1. <u>n/a</u> The average monthl 100 wireless handsets for supeach company switch.	•	
Trouble Type	Switch A (location)	Switch B (location)
No service		
Network busy		
Interruption of service	TOTAL CONTRACTOR OF THE PROPERTY OF THE PROPER	distribution of the second
Poor reception		
2. X The average month	ly number of customer troub	ole reports, as defined
in Section 860-034-0390 (5)	of the Oregon PUC rules, pe	er 100 access lines,
received during calendar yea	r 2008: <u>.05</u> per month, pe	er 100 working access
lines.		

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108.5 AVG HRS TO CLEAR

1,000.7 AVG HRS TO RESPOND

GRAND TOTAL 66

Report #7 – Network Improvement Plan – CETCs Only

Per Docket No. UM 1217, Order No. 06-292, competitive ETCs (CETCs) must file network improvement plans annually for recertification purposes. Appendix A of the order details the information that must be included in such plans. Only CETCs must file these plans for annual recertification purposes; ILECs are not required to file such plans. CETCs that receive *only* low-income program support (no high-cost or access-related support) do not have to file network improvement plans. CETCs are strongly encouraged to use the template in the attached Excel worksheets for their network improvement plans. This template incorporates all the items of information required by the order.

Report #8 - Special Commitments/Requirements - CETCs only

Did the Oregon PUC impose any special commitments or requirem	ients	at initial	
designation or during the previous annual recertification process?	yes	no _	•
If yes, identify the commitments or requirements and explain if, an met.	d ho	w, they ha	ive beer

Report #9 – Certifications - All ETCs

9.1. IAS or ICLS Certification Copy – All ETCs Receiving IAS and/or ICLS

All ETCs receiving interstate access-related support (IAS or ICLS) must submit a copy of the certification for the use of IAS or ICLS support that was sent to USAC and the FCC in June 2009.

<u>9.2. Certification of Use of Universal Service Funds</u> – All ETCs receiving HCL and/or LSS (Rural ILECs and CETCs Designated in Rural ILEC Areas)

To continue receiving traditional high cost support (HCL, LSS), ETCs must submit a notarized affidavit signed by a responsible company official certifying that the carrier will use the high cost support funds only for the intended purposes. Use of the sample affidavit form displayed on the following page is recommended.

9.3. Certification of Emergency Functionality and Compliance with Service Quality and Consumer Protection Measures – All ETCs

Each ETC must submit a notarized affidavit signed by a responsible company official certifying that the carrier: 1) is able to remain functional in an emergency, and 2) is complying with all service quality and consumer protection measures in either the applicable Oregon Commission rules (for wireline carriers), the CTIA Consumer Code (for wireless carriers), or some other specific set of standards. All ETCs must submit this affidavit. A copy of an acceptable affidavit form follows the affidavit for high cost support.

AFFIDAVIT CERTIFYING USE OF UNIVERSAL SERVICE FUNDS

I, James A Smith , being of lawful age and duly sworn, on my oath,

state that I am the $__$	President	[an officer] of						
Helix Telelph	one Company ("	Company") and that I am authorized to						
execute this Affidavit of are true to the best of m	_	any, and the facts set forth in this Affidavit ation and belief.						
Pursuant to the rules of the Federal Communications Commission, 47 C.F.R. § 54.314, there must be annual certification that funds received under the federal Universal Service Fund programs will be used only for the provision, maintenance and upgrading of facilities and services for which the support is intended. The Company hereby certifies to the Public Utility Commission of Oregon that pursuant to 47 C.F.R. § 54.7, and for surposes of the certification required under 47 C.F.R. § 54.314, the company will use all federal high-cost support provided to it only for the provision, maintenance and apprading of facilities and services for which the support is intended, consistent with the principles of universal service set forth in 47 U.S.C. 254. This includes, but is not limited to, trying to meet the goal of the provision of services that are properly supported by the high-cost funds at rates that are reasonably comparable to rates charged for similar ervices in urban areas.								
DATED this <u>25th</u> da	ny of June , 2	009.						
Helix Telepho	ne Company	(Company)						
BEJ <i>ames le</i>	Mak	(Name)						
Its: President		(Title)						
SUBSCRIBED AND S On the R Notary public in and fo	Roger	this 25th day of June, 2009.						
My Commission Expire	es: 12/04/2010							



AFFIDAVIT CERTIFYING EMERGENCY FUNCTIONALITY AND COMPLIANCE WITH SERVICE QUALITY AND CONSUMER PROTECTION MEASURES

I, James A Smith , being of lawful age and duly sworn, on my oath,
I, <u>James A Smith</u> , being of lawful age and duly sworn, on my oath, state that I am the <u>President</u> [an officer] of
state that I am the President [an officer] of Helix Telelphone Company ("Company") and that I am authorized to
execute this Affidavit on behalf of the Company, and the facts set forth in this Affidavit
are true to the best of my knowledge, information and belief.
The Company hereby certifies to the Public Utility Commission of Oregon, pursuant to
the requirements of Commission Order No. 06-292, that it:
1) is able to remain functional in emergencies, and,
2) complies with service quality and consumer protection measures in
(check one):
x applicable Oregon Commission rules, or
the CTIA Consumer Code for Wireless Carriers, or
other (describe and explain conformance with requirements of
Order No. 06-292):
DATED this 25th day of June, 2009.
Helix Telephone Company (Company)
By: ////////// (Name)
Its: President (Title)
SUBSCRIBED AND SWORN to before me this 25thday of June, 2009.
$\bigcirc \land \bigcirc \bigcirc$
Onno 1 lage
Notary public in and for the State of Oregon
10/0//0010
My Commission Expires: 12/04/2010

OFFICIAL SEAL
CONNIE R REGER
NOTARY PUBLIC-OREGON

NOTARY PUBLIC-OREGON
COMMISSION NO. 411124
MY COMMISSION EXPIRES DECEMBER 4, 2010

Interstate Common Line Support (ICLS) 2009-2010

То:	Office of Secretary Federal Communications Commission 445 - 12th Street, SW Washington, DC 20554		
	Karen Majcher Vice President - High Cost and Low Incol Universal Service Administrative Compar 2000 L Street, NW, Suite 200 Washington, DC 20036		
Re:	CC Docket No. 96-45 Interstate Common Line Support Annual Certification Filing	rt - ICLS	
will use its	certify that <u>Helix Telephone Company</u> s INTERSTATE COMMON LINE SUPPOR ading of facilities and services for which the	•	sion, maintenance
	orized to make this certification on behalf o a(s) listed below. (Please enter your Com		
	Company Name	State	Study Area Code (6 digits)
	Helix Telephone Company	Oregon	532376
	(If necessary, attach a separa	ate list of additional study a	reas and check this box.)
Sante	a of Authorized Representative] Jame of Authorized Representative]	Date: <u>June 22n</u>	d 2009
President [Title of A	uthorized Representative]		
Carrier's Carrier's	Name: Helix Telephone Company		Date Received

Date

June 22nd 2009



UNIVERSAL SERVICE FUND 2009 DATA COLLECTION - CERTIFICATION FORM

l am		Presiden	t		. I hereby certi	ify that I have overall		
		(Title of Certifyin		mployee)				
respo	nsibility fo	r the preparation o	of all data in t	he attache	d 2009-	data submission for		
					(Title of Data Submis	sion)		
	He1ix	Telephone	Company	I	and that I am authorize	ed to execute this certification.		
	(1	Name of Carrier)						
this s	ubmission,		at the data ha	ave been e	examined and reviewed	or the preparation of the data in and are complete, accurate,		
	Dat	te:		6/16/	09			
	Cer	tifying Signature:	Zami	a le	mile			
Name: James A Smith								
	Title	e:	P	reside	nt			
	Per	iod Covered:		20	009	<u>. </u>		
		tus: The rural stat	Rural	npany durii	ng calendar year 2010 w Non-Rural	rill be: (Check One)		
	ly company	/ has not acquired	an exchange	during the	e period covered.			
M	ly company	/ has acquired the	following ex	change(s) c	during the period covere	ed		
Exchange Name				S	elling Company	No. Of Loops		

Pursuant to FCC rules, Section 69.601(C), exchange carriers are required to certify Universal Service Fund data submitted to NECA.

(FCC rules state that persons making willful false statements in this data submission can be punished by fine or imprisonment under the provisions of the U.S. Code, Title 18 Section 1001).

NATIONAL EXCHANGE CARRIER ASSOCIATION

COST STUDY CERTIFICATION FORM

I am	President
	(Title of Certifying Officer or Employee)
I hereby certif	fy that I have overall responsibility for the preparation of all data in the attached
	2008 Cost Study
	(Title of Data Submission)
data submissi	on for Helix Telephone Company
	(Name of Exchange Carrier)
and that I am	authorized to execute this certification.
Based on in	formation known to me or provided to me by employees responsible for the
preparation o	of the data in this submission, I hereby certify that the data have been examined and
reviewed an	nd are complete, accurate, and consistent with the rules of the Federal
Communicati	ions Commission.
Additionally,	, I certify the following regarding the source of the financial data included in the
Cost Study (F	Please check appropriate response):
TI K	his company is audited and the financial data used for the cost study, with
aŗ	ppropriate adjustments as per FCC rules, is based on audited data.
	☐ This company is audited at holding company level. The audited entity is
	•
	☐ This company is audited at study area level.
₽ -T	his company is audited but the audit has not been completed. Any necessary
u	pdates resulting from the audit will be recognized in future cost study revisions. I
W	vill provide a copy of the audit report upon its completion.
□Т	his company is not audited and therefore does not have audited financials.
Date:	6/16/09
Certifying Si	ignature: 10000 Committee
Name	James A Smith
Title:	President
	CC Rules, Section 69.601(c), Exchange Carriers are required to certify Cost Study Data submitted to
NECA. (FCC	Rules state that persons making willful false statements in this data submission can be punished by

fine or imprisonment under the provisions of the U.S. Code, Title 18, Section 1001.) Note: For certification of

multiple study areas, complete the information on the reverse side of this page.

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