

December 24, 2014

Public Utility Commission of Oregon
Attn: Ms. Kay Marinos
3930 Fairview Industrial Drive SE
Salem, OR 97308

RE: Docket No. UM-1688 – C.F.R. 54.314 State Certification
Nehalem Telecommunications

Dear Ms. Marinos:

Pursuant to C.F.R. 54.313 (h)(2) Nehalem Telecommunications, Inc. (“Nehalem”) is required to submit updates to its residential local rates by January 2 each year. Nehalem recently increased its rates to meet the revised rate floor threshold and has submitted its required update to NECA for transmission to USAC by the required.

Nehalem respectfully submits a copy of its certifications as well as its rate floor collection that was issued to USAC through NECA. Line count data has been redacted from this submission in conjunction with the Protective Order issued by the FCC in WC Docket No. 10-90.

Please feel free to contact me with any question you may have in this matter.

Sincerely,



Eric N. Votaw, Senior Manager for
Moss Adams LLP

Enclosures

Block 1 - Contact Information

ROW #	DATA ELEMENT	FORMAT OF REQUESTED DATA	RESPONSE
1	Carrier Study Area Code	6 numeric digits	532387
2	Carrier Study Area Name	alpha characters	NEHALEM TELECOMMUNICATIONS, INC. DBA NEHAL
3	Service Provider Identification Number	9 numeric digits	143002628
4	Residential Local Service Charge Effective Date	mmddyy	12/01/14
5	Contact Name	alpha characters	Arrington, Beverly A
6	Contact Telephone Number (include area code)	9 numeric digits	208-356-2614
7	Sheet Number	numeric digit(s)	
8	Total Number of Sheets	numeric digit(s)	

Block 2- Residential Local Service Rates, Fees, and Line Counts


Column 1 Residential Local Service Charge	Column 2 State Subscriber Line Charge	Column 3 State Universal Service Fee	Column 4 Mandatory Extended Area Service Charge	Column 5 Loops	Column 6 Exchange Name/ Zone Name	Column 7 Class Of Service
14.80		1.30			Neahlem	Residential Flat Rate
14.80		1.30			Neahlem	Residential Flat Rate
14.80		1.30			Neahlem	Lifeline

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

Certification of Officer to Authorize an Agent to File Rate Floor Data on Behalf of Reporting Carrier


I certify that National Exchange Carrier Association (NECA) 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 actual rate floor data provided to the authorized agent; and, to the best of my knowledge, the actual rate floor data provided to the authorized agent is accurate.

I certify that I am authorized to submit the information reported on this form on behalf of the reporting carrier; that I have provided the information reported herein based on data provided by the reporting carrier; and to the best of my knowledge the information reported herein is accurate.

Name of Authorized Agent <u>National Exchange Carrier Association (NECA)</u>			
Name of Reporting Carrier <u>Nehalem Telecommunications Inc.</u>			
Signature of authorized officer			Date <u>12/10/14</u>
Printed name of authorized officer <u>Michael J. Martell</u>			
Title or position of authorized officer <u>Vice-President</u>			
Telephone number of authorized officer: <u>(208) 366-2614</u> ext. _____			
Study Area Code of Reporting Carrier	<u>532387</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>01/02//2015</u>

Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier		Nehalem Telecommunications Inc.		Date	12/10/14
Signature of authorized officer					
Printed name of authorized officer		Michael J. Martell			
Title or position of authorized officer		Vice-President			
Telephone number of authorized officer:		(208) 366-2614	ext.		
Study Area Code of Reporting Carrier	532387		Filing Due Date for this form (mm/dd/yyyy)	01/02/2015	