

DOCKET NO. UM 1726

**Cover Sheet for Submission of
2015 Annual ETC Certification Reports**

Name of Eligible Telecommunications Carrier: Scio Mutual Telephone

Filing date: June 16, 2015

Is this: Original submission? X
 OR
 Revised submission?

Person to contact for questions:

Name Eric Votaw

Phone number (209) 955-6116

E-mail address Eric.Votaw@mossadams.com

Documents included in this filing (please check applicable items):

 X CAF/ICC Support (47 CFR § 54.304)

 X Rate Floor Data (47 CFR § 54.313(h))

 Form 481 (High-cost per 47 CFR § 54.313, Low-income per 54.422)¹

 Form 690 (Mobility Fund per 47 CFR § 54.1009)

 Affidavit for High-Cost Support

Filing deadlines: The deadlines for filing items required by 47 CFR § 54 are the same as the deadlines for filing with the FCC. The notarized affidavit for high-cost support must be filed no later than the due date for the FCC Form 481. Based on current information, it appears that all items other than CAF/ICC support data are due by July 1, 2015. The CAF/ICC support data are due the same day as the ETC's interstate access tariff filing.

If revisions to an original submission are filed with the FCC or USAC, a copy of the revisions must be filed with the Oregon Commission no later than five business days following submission to the FCC or USAC.

¹ Lifeline-only ETCs must provide all information specified in 47 CFR § 54.422(b) even if the ETC does not submit this information to the FCC.



2015 CAF ICC Data Collection

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Study Area: SCIO MUTUAL TEL ASSN (ID: 532397)

Intrastate Revenues (FCC TRP exhibit)

Option 1: View TRP Output in Excel

Option 2: Download TRP Data in Excel

Intrastate Revenues

Test Year 2015-2016 Expected Maximum Intrastate Revenue: \$0.00

Col D -- Rate Element Description	Col E -- Unit of Demand	Col F -- 7/1/2015 Interstate Rate	Col G -- Test Year 2014-2015 Current Intrastate Rate	Col H -- 7/1/2015 Proposed Intrastate Rate	Col I -- FY 2011 Intrastate Units: Terminating for Non-Dedicated or Originating and Terminating for Dedicated Elements	Col J -- H* Intrastate Price-out with 7/1/2015 proposed intrastate rate and FY2011 Demand	Col K -- FY 2014 Intrastate Units: Terminating for Non-Dedicated and total for Dedicated Elements	Col L -- Test Year 2015-2016 Forecasted Intrastate Units	Col M -- [(L/K)^ (12/21)-1] *100 Intrastate Units Growth Rate %	Col N -- H*L TY 2015-16 Forecasted Intrastate Revenue
Terminating End Office Access Service	MOU									
Terminating End Office, Premium, per access minute										
Terminating End Office Access Service	MOU									
Terminating End Office, Non-Premium, per access minute										
Entrance Facility, Per Termination Voice Grade Two Wire	Termination									
Entrance Facility, Per Termination Voice Grade Four Wire	Termination									
Entrance Facility, Per Termination High Capacity DS1	Termination									
Entrance Facility, Per Termination High Capacity DS3	Termination									
Entrance Facility, Per Termination Synchronous Optical Channel OC3	Termination									
Entrance Facility, Per Termination Synchronous Optical Channel OC12	Termination									
Entrance Facility, Per Termination ESALT 2 Mbps	Circuit									
Entrance Facility, Per Termination ESALT 10 Mbps	Circuit									
Entrance Facility, Per Termination ESALT 50 Mbps	Circuit									
Direct Trunked Transport Facility/ Mile Voice Grade - Two Wire & Four Wire	Mile									

Direct Trunked Transport Facility/ Mile High Capacity DS1	Mile	
Direct Trunked Transport Facility/ Mile High Capacity DS3	Mile	
Direct Trunked Transport Facility/ Mile Synchronous Optical Channel OC3	Mile	
Direct Trunked Transport Facility/ Mile Synchronous Optical Channel OC12	Mile	
Direct Trunked Transport Facility/ Mile ESALT 2 Mbps DTF-E1	Circuit Miles	
Direct Trunked Transport Facility/ Mile ESALT 2 Mbps DTF-E2	Circuit Miles	
Direct Trunked Transport Facility/ Mile ESALT 2 Mbps DTF-E3	Circuit Miles	
Direct Trunked Transport Facility/ Mile ESALT 2 Mbps DTF-E4	Circuit Miles	
Direct Trunked Transport Facility/ Mile ESALT 10 Mbps DTF-E1	Circuit Miles	
Direct Trunked Transport Facility/ Mile ESALT 10 Mbps DTF-E2	Circuit Miles	
Direct Trunked Transport Facility/ Mile ESALT 10 Mbps DTF-E3	Circuit Miles	
Direct Trunked Transport Facility/ Mile ESALT 10 Mbps DTF-E4	Circuit Miles	
Direct Trunked Transport Facility/ Mile ESALT 50 Mbps DTF-E1	Circuit Miles	
Direct Trunked Transport Facility/ Mile ESALT 50 Mbps DTF-E2	Circuit Miles	
Direct Trunked Transport Facility/ Mile ESALT 50 Mbps DTF-E3	Circuit Miles	
Direct Trunked Transport Facility/ Mile ESALT 50 Mbps DTF-E4	Circuit Miles	
Direct Trunked Transport Facility/Termination Voice Grade - Two Wire & Four Wire	Termination	
Direct Trunked Transport Facility/Termination High Capacity DS1	Termination	
Direct Trunked Transport Facility/Termination	Termination	

High Capacity DS3 Direct Trunked Transport Facility/Termination Synchronous Optical Channel OC3	Termination	
Direct Trunked Transport Facility/Termination Synchronous Optical Channel OC12	Termination	
Direct Trunked Transport Facility/Termination ESALT 2 Mbps	Circuit terms	
Direct Trunked Transport Facility/Termination ESALT 10 Mbps	Circuit terms	
Direct Trunked Transport Facility/Termination ESALT 50 Mbps	Circuit terms	
Multiplexing, Per Arrangement DS3 to DS1	Termination	
Multiplexing, Per Arrangement DS1 to Voice	Termination	
Customer Node Per Node OC3 155.52 Mbps	Port	
Customer Node Per Node OC12 622.08 Mbps	Port	
Customer Premises Port, Per Port OC3 155.52 Mbps	Port	
Customer Premises Port, Per Port STS-1 51.84 Mbps	Port	
Customer Premises Port, Per Port DS3 44.736 Mbps	Port	
Customer Premises Port, Per Port DS1 1.544 Mbps	Port	
Add/Drop Multiplexing Central Office Port, Per Port DS1 1.544 Mbps	Port	
Add/Drop Multiplexing Central Office Port, Per Port OC3 155.52 Mbps	Port	
Add/Drop Multiplexing Central Office Port, Per Port DS3 44.736 Mbps	Port	
Network Blocking, Per Blocked Call Network Blocking, Per Blocked Call, Applies to FGD only	Call	
ESALT Real Time CoS/QoS, Per ESALT DTF-E1 Facility ESALT 2 Mbps	Facility	
ESALT Real Time CoS/QoS, Per ESALT DTF-E1 Facility ESALT 10 Mbps	Facility	
ESALT Real Time CoS/QoS, Per ESALT DTF-E1 Facility ESALT 50 Mbps	Facility	

ESALT Entrance Facility Protection, Per ESALT Entrance Facility ESALT 2 Mbps	Circuit	
ESALT Entrance Facility Protection, Per ESALT Entrance Facility ESALT 10 Mbps	Circuit	
ESALT Entrance Facility Protection, Per ESALT Entrance Facility ESALT 50 Mbps	Circuit	
Common Channel Signaling Network Connection Signaling Mileage Facility, Per Mile	Mile	
Common Channel Signaling Network Connection Signaling Mileage Termination, Per Termination	Termination	
Common Channel Signaling Network Connection Signaling Entrance Facility, Per Facility	Facility	
Common Channel Signaling Network Connection STP Port, Per Port	Port	
Terminating Tandem Switched Transport Terminating Tandem Switched Transport Facility	Minutes / Mile	
Terminating Tandem Switched Transport Terminating Tandem Switched Termination	Minutes	
Terminating Tandem Switched Transport Terminating Tandem Switching	Minutes	
Nonrecurring Charges Voice Grade Two Wire	Facility	
Nonrecurring Charges Voice Grade Four Wire	Facility	
Nonrecurring Charges High Capacity DS1	Facility	
Nonrecurring Charges High Capacity DS3	Facility	
Nonrecurring Charges Synchronous Optical Channel OC3	Facility	
Nonrecurring Charges Synchronous Optical Channel OC12	Facility	
Nonrecurring Charges Interim NXX Translation, Per Order	Order	
Nonrecurring Charges FGC and FGD Conversion of Multifrequency Address Signaling to SS7 Signaling or SS7		

Signaling to Multifrequency Address Signaling, per 24 trunks converted or fraction thereof on a per order basis	Order	
Nonrecurring Charges Trunk Activation, per 24 trunks activated or fraction thereof on a per order basis	Order	
Nonrecurring Charges Flexible Automatic Number Identification (Flex ANI), per End Office, per CIC	End Office	
Nonrecurring Charges ESALT 2 Mbps	Facility	
Nonrecurring Charges ESALT 10 Mbps	Facility	
Nonrecurring Charges ESALT 50 Mbps	Facility	
Nonrecurring Charges ESALT Direct Trunked Termination, per ESALT Direct Trunked Termination installed	Order	
Nonrecurring Charges ESALT Entrance Facility Protection, per ESALT Entrance Facility	Facility	

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Study Area: SCIO MUTUAL TEL ASSN (ID: 532397)

Study Area USAC Reports

[View Printer-friendly report]

2015 USAC Data Report

CONNECT AMERICA FUND

Data to be Provided to USAC/FCC in June 2015 for CAF ICC Purposes

Current Settlement Type: Cost

Test Period 7/1/15-6/30/16 Post True-up (Filing) View	
Rate-of-Return (ROR) Carrier Revenue Requirement	
1	2011 Interstate Switched Access Revenue Requirement
2	FY 2011 Intrastate Terminating Switched Access Revenues
3	FY 2011 Net Reciprocal Compensation Revenues
4	2011 ROR Carrier Base Period Revenue (Line 1 + Line 2 + Line 3)
5	ROR Carrier Baseline Adjustment Factor (0.95 x 0.95 x 0.95 x 0.95)
6	ROR Carrier Revenue Requirement (Line 4 x Line 5)
7	Pool Administration Expenses
8	Total ROR Carrier Revenue Requirement (Line 6 + Line 7)
Revenues from Reformed Inter-carrier Compensation (ICC) Rates	
9	Interstate Switched Access Revenues
10	Interstate Allocated Switched Access Revenues#
11	Transitional Intrastate Access Service Revenues
12	Net Transitional Reciprocal Compensation Revenues
13	Total ICC Revenue (Line 10 + Line 11 + Line 12)
Eligible Recovery	
14	TRS Increment
15	Regulatory Fees Increment
16	NANPA Increment
17	Interstate Local Switching Support for Price Cap Affiliates
18	Adjustment for Double Recovery or Corrections
19	Test Period 13/14 Trueup - Net Impact on Total Eligible Recovery
20	Eligible Recovery (Line 8 - Line 13) + (Line 14 + Line 15 + Line 16 + Line 18 + Line 19) - (Line 17)
Revenues from Access Recovery Charges (ARC)	
21	Residential ARC Revenues
22	Single Line Business ARC Revenues
23	Multi-Line Business ARC Revenues
24	Total ARC Revenues (Line 21 + Line 22 + Line 23)
Connect America Fund (CAF) ICC Support**	
25	Connect America Fund (CAF) ICC Support (Line 20 - Line 24)

NOTES:

#Per FCC Designation Order, calculated as (Sum of Line 9 for all TS pool participants) * (Line 1/ Sum of Line 1 for all TS pool participants)

**NECA estimate provided for informational purposes only - actual to be calculated by USAC.

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Study Area: SCIO MUTUAL TEL ASSN (ID: 532397)

Access Recovery Charges

Recalculate ARC Rates & CAF Support revenues

Test Period 2015-2016 Pre-True-up View Test Period 2015-16 Post-True-Up (Filing) View

Test Period 2015-2016 Post True-Up (Filing) View

Exchange/Zone Name	Residential Lines excluding Lifelines	Residential ARC	Residential ARC Revenue	SLB Lines	SLB ARC	SLB ARC Revenue	MLB Lines	MLB ARC	MLB ARC Revenue	Total ARC Revenue
Scio/1										
Scio/2										
Scio/3										
Scio/4										
Study Area Summary										



2015 CAF ICC Data Collection

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Study Area: SCIO MUTUAL TEL ASSN (ID: 532397)

Study Area - Exchange Level Residential Lines and Local Rates for ARC Calculation

[Upload Residential Lines & Rates]

[Download NECA template]

Exchange Level Residential Lines & Rates Residential Lines & Rates Summary Study Area Test Period Lines

Test Period 2015/2016

Study Area Lines for Test Period 2015/2016 - (July 1, 2015 - June 30, 2016)

Study Area ID	Test Year 2015-16 Residential Lines Excluding Life Lines	Test Year 2015-16 Single Line Business Lines	Test Year 2015-16 Multi-Line Business Lines
532397			

Data previously submitted on 3/31/2015 7:41:57 PM (Eastern Time)
Data submitted by Choua Her

Submit Response

[Records response entered/updated on the above part of the screen]

TO BE COMPLETED BY THE REPORTING CARRIER.

Certification of Officer as to the Accuracy of the CAF ICC Data Reported

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

Name of Reporting Carrier: SCIO MUTUAL TEL ASSN

Signature of Authorized Officer: **Thomas Barth**

Digitally signed by Thomas Barth DN: cn=Thomas Barth, email=tbarth@amt-nel.com, o=scio mutual tel assn, |Scio OR 97374, Date: 5/21/2015

Date: 5/21/2015

Printed name of Authorized Officer: Thomas Barth

Title or position of Authorized Officer: CEO/General Manager

Telephone number of Authorized Officer: 503-394-3366

Study Area Code of Reporting Carrier

532397

Filing Due Date for this form
(mm/dd/yyyy)

6/16/2015

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 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 knowledge, the actual data provided to the Authorized Agent is accurate.

Name of Authorized Agent: National Exchange Carriers Association, Inc.

Name of Reporting Carrier: SCIO MUTUAL TEL ASSN


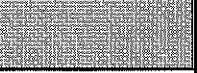
Signature of Authorized Officer: Thomas Barth
Digitally signed by Thomas Barth DN: cn=Thomas Barth, email=tbarth@smt-net.com, o=scio mutual tel assn, c=Scio OR 97374, Date: 5/21/2015

Date: 5/21/2015

Printed name of Authorized Officer: Thomas Barth

Title or position of Authorized Officer: CEO/General Manager

Telephone number of authorized officer: 503-394-3366

Study Area Code of Reporting Carrier	<u>532397</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>6/16/2015</u>	
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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: SCIO MUTUAL TEL ASSN

Thomas Barth

Digitally signed by Thomas Barth DN:cn=Thomas Barth, email=tbarth@smt-net.com, o=scio mutual tel assn, l=Scio OR 97374, Date:5/21/2015

Signature of Authorized Officer or employee:

Date: 5/21/2015

Printed name of Authorized Officer or employee: Thomas Barth

Title or position of Authorized Officer or employee: CEO/General Manager

Telephone number of Authorized Officer or employee: 503-394-3366

Study Area Code of Reporting Carrier

532397

Filing Due Date for this form
(mm/dd/yyyy)

6/16/2015

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 carrier and that, to the best of my knowledge, the reporting carrier is not seeking duplicative recovery in the state jurisdiction for any Eligible Recovery subject to the recovery mechanism as per §51.917(d)(vii).

Name of Reporting Carrier: SCIO MUTUAL TEL ASSN

Thomas Barth

Digitally signed by Thomas Barth DN:cn=Thomas Barth,email=tbarth@smt-net.com,o=scio mutual tel assn,l=Scio OR 97374, Date:5/21/2015

Signature of Authorized Officer or employee:

Date: 5/21/2015

Printed name of Authorized Officer or employee: Thomas Barth

Title or position of Authorized Officer or employee: CEO/General Manager

Telephone number of Authorized Officer or employee: 503-394-3366

Study Area Code of Reporting Carrier

532397

Filing Due Date for this form
(mm/dd/yyyy)

6/16/2015

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.

RATE FLOOR DATA COLLECTION - OMB Control Number 3060-0986

Block 1 - Contact Information

ROW #	DATA ELEMENT	FORMAT OF REQUESTED DATA	RESPONSE
1	Carrier Study Area Code	6 numeric digits	532397
2	Carrier Study Area Name	alpha characters	SCIO MUTUAL TEL. ASSOCIATION
3	Service Provider Identification Number	9 numeric digits	143002636
4	Residential Local Service Charge Effective Date	mm/dd/yy	07/01/15
5	Contact Name	alpha characters	Her, Choua
6	Contact Telephone Number (include area code)	9 numeric digits	209-955-6141
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
9						
10						

Rate Floor Data

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			
<p>I certify that <u>National Exchange Carrier Association (NECA)</u> 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.</p> <p>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.</p>			
Name of Authorized Agent: <u>National Exchange Carrier Association (NECA)</u>			
Name of Reporting Carrier: <u>Scio Mutual Telephone Association</u>			
Signature of authorized officer: <u>Thomas J. Barth</u>			Date: <u>06.11.2015</u>
Printed name of authorized officer: <u>Thomas J. Barth</u>			
Title or position of authorized officer: <u>CEO/General Manager</u>			
Telephone number of authorized officer: <u>(503) 394-3366</u> ext. _____			
Study Area Code of Reporting Carrier: <u>532397</u>	Filing Due Date for this form (mm/dd/yyyy): <u>07/01/2015</u>		

Rate Floor Template

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		Scio Mutual Telephone Association	
Signature of authorized officer	<i>Thomas J. Barth</i>	Date	06.11.2015
Printed name of authorized officer	Thomas J. Barth		
Title or position of authorized officer	CEO/General Manager		
Telephone number of authorized officer	(503) 394-3366 ext.		
Study Area Code of Reporting Carrier	532397	Filing Due Date for this form (mm/dd/yyyy)	07/01/2015