

DOCKET NO. UM 1688

**Cover Sheet for Submission of
2014 Annual ETC Certification Reports**

Name of Eligible Telecommunications Carrier: Oregon-Idaho Utilities, Inc.

Filing date: June 27, 2014

Is this: Original submission? X

OR

Revised submission? _____

Person to contact for questions:

Name Douglas Musgrave

Phone number (208) 461-7802

E-mail address doug.musgrave@oiutelecom.net

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

CAF/ICC Support (47 CFR § 54.304)

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, 2014. 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.

AFFIDAVIT CERTIFYING USE OF UNIVERSAL SERVICE FUNDS

I, Douglas N. Musgrave [*name of company officer*], being of lawful age and duly sworn, on my oath, state that I am the Manager/ Assistant Corp. Secretary [*title*] of Oregon-Idaho Utilities, Inc. [*Company name*] 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.

Pursuant to the requirements of the Federal Communications Commission, 47 C.F.R. § 54.314, Oregon-Idaho Utilities, Inc. [*Company name*] hereby certifies to the Public Utility Commission of Oregon that it is eligible to receive federal high-cost support for the program years cited.

I attest that all federal high-cost support provided to Oregon-Idaho Utilities, Inc. [*Company name*] in Oregon was used in the preceding calendar year (2013) and will be used in the coming calendar year (2015) only for the provision, maintenance and upgrading of facilities and services for which the support is intended.

DATED this 27th day of June, 2014.

By:  (*Officer's Name*)

Its: Manager/ Assistant Corp. Secretary (*Officer's Title*)

SUBSCRIBED AND SWORN to before me this 27 day of June, 2014.



Notary public in and for the State of OREGON

My Commission Expires: JUNE 19, 2016



OREGON-IDAHO UTILITIES INC.

1023 N. Horton Street
P.O. Box 1880
Nampa, Idaho 83653
208-461-7802
208-461-7896 FAX

June 27, 2014

Public Utility Commission of Oregon
ATTN: Filing Center
3930 Fairview Industrial Drive SE
Salem, OR. 97302-1166

RE: UM 1688 Submission of Annual ETC Recertification Reports and Request for Certain Financial Information to be withheld from public disclosure.

Dear Commission,

Enclosed, please find Oregon-Idaho Utilities FCC form 481 submission for SAC 532390. This Form 481 has been filed with USAC and the FCC. In accordance with public disclosure laws in the State of Oregon, including OAR 860-032-0070 and ORS 192.501, Oregon-Idaho Utilities, Inc. requests the attachments "Line 112, and Line 3017, Five Year Service Improvement Plan, and RUS Operating Report and Management Letter" of the FCC Form 481 submission of Oregon-Idaho Utilities be withheld from public disclosure on the grounds that it contains company specific financial information including information based upon audited financial reports and includes affiliated companies' financial results of operations, all of which is competitively sensitive in nature. The information from our UM 1688 submission to be withheld is separated from non-sensitive information and has been placed on yellow paper, and in the envelope marked "Confidential" as required by OAR 860-001-0070. In addition, each page to be withheld has been marked "Confidential" at the top and bottom of the page. Please contact me if you have any questions regarding this filing and confidentiality request.

Sincerely,



Douglas N. Musgrave
Manager

enclosures

<010> Study Area Code 532390

<015> Study Area Name OREGON-IDAHO UTIL.

<020> Program Year 2015

<030> Contact Name: Person USAC should contact with questions about this data Doug Musgrave

<035> Contact Telephone Number: Number of the person identified in data line <030> 2084617802 ext.

<039> Contact Email Address: Email of the person identified in data line <030> doug.musgrave@oiutelecom.net

ANNUAL REPORTING FOR ALL CARRIERS

	54.313 Completion Required	54.422 Completion Required
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(check box when complete)

<100> Service Quality Improvement Reporting (complete attached worksheet)

<200> Outage Reporting (voice) (complete attached worksheet)

<210> ← check box if no outages to report

<300> Unfulfilled Service Requests (voice) 0

<310> Detail on Attempts (voice) (attach descriptive document)

<320> Unfulfilled Service Requests (broadband) 0

<330> Detail on Attempts (broadband) (attach descriptive document)

<400> Number of Complaints per 1,000 customers (voice)

<410> Fixed 0.0

<420> Mobile 0.0

<430> Number of Complaints per 1,000 customers (broadband)

<440> Fixed 0.0

<450> Mobile 0.0

<500> Service Quality Standards & Consumer Protection Rules Compliance (check to indicate certification)

<510> 532390ORID510.pdf (attached descriptive document)

<600> Functionality in Emergency Situations (check to indicate certification)

<610> 532390ORID610.pdf (attached descriptive document)

<700> Company Price Offerings (voice) (complete attached worksheet)

<710> Company Price Offerings (broadband) (complete attached worksheet)

<800> Operating Companies and Affiliates (complete attached worksheet)

<900> Tribal Land Offerings (Y/N)? (if yes, complete attached worksheet)

<1000> Voice Services Rate Comparability (check to indicate certification)

<1010> (attach descriptive document)

<1100> Terrestrial Backhaul (Y/N)? (if not, check to indicate certification)

<1110> (complete attached worksheet)

<1200> Terms and Condition for Lifeline Customers (complete attached worksheet)

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000> (check to indicate certification)

<2005> (complete attached worksheet)

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000> (check to indicate certification)

<3005> (complete attached worksheet)

(100) Service Quality Improvement Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	532390
<015>	Study Area Name	OREGON - IDAHO UTIL.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Doug Muegrave
<035>	Contact Telephone Number - Number of person identified in data line <030>	2084617802 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	doug.muegrave@oiutelecom.net

<110>	Has your company received its ETC certification from the FCC? If your answer to Line <110> is yes, do you have an existing § 54.202(a) "5 year plan" filed with the FCC?	(yes / no) <input type="radio"/> <input checked="" type="radio"/>
<111>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.	(yes / no) <input type="radio"/> <input type="radio"/>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

532390or112.pdf

Name of Attached Document

Please check these boxes below to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

<113> Maps detailing progress towards meeting plan targets	<input checked="" type="checkbox"/>
<114> Report how much universal service (USF) support was received	<input checked="" type="checkbox"/>
<115> How (USF) was used to improve service quality	<input checked="" type="checkbox"/>
<116> How (USF) was used to improve service coverage	<input checked="" type="checkbox"/>
<117> How (USF) was used to improve service capacity	<input checked="" type="checkbox"/>
<118> Provide an explanation of network improvement targets not met in the prior calendar year.	<input type="checkbox"/>

(900) Tribal Lands Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	512290
<015> Study Area Name	OREGON-IDAHO UTIL.
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Doug Mungrave
<035> Contact Telephone Number - Number of person identified in data line <030>	2084617802 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	doug.mungrave@iutelecom.net

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select (Yes, No, NA)

(1100) No Terrestrial Backhaul Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	532390
<015> Study Area Name	OREGON-IDAHO UTIL.
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Doug Musgrave
<035> Contact Telephone Number - Number of person identified in data line <030>	2084617802 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	doug.musgrave@oiutelecom.net

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)

(1200) Terms and Condition for Lifeline Customers	FCC Form 481
Lifeline	OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Collection Form	July 2013

<010>	Study Area Code	532390
<015>	Study Area Name	OREGON-IDAHO UTIL.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Doug Musgrave
<035>	Contact Telephone Number - Number of person identified in data line <030>	2084617902 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	doug_musgrave@niurelecom.net

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

532390or1210.pdf

Name of Attached Document

<1220> Link to Public Website

HTTP

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- <1221>** Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,
- <1222>** Details on the number of minutes provided as part of the plan,
- <1223>** Additional charges for toll calls, and rates for each such plan.

(2000) Price Cap Carrier Additional Documentation Data Collection Form <i>Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers</i>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	532190
<015>	Study Area Name	OREGON-IDAHO UTIL.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Doug Musgrave
<035>	Contact Telephone Number - Number of person identified in data line <030>	2084617802 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	doug.musgrave@iutelecom.net

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

- <2010> 2nd Year Certification (47 CFR § 54.313(b)(1))
- <2011> 3rd Year Certification (47 CFR § 54.313(b)(2))

Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))

- <2012> 2013 Frozen Support Certification
- <2013> 2014 Frozen Support Certification
- <2014> 2015 Frozen Support Certification
- <2015> 2016 and future Frozen Support Certification

Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))

- <2016> Certification Support Used to Build Broadband

Connect America Phase II Reporting (47 CFR § 54.313(e))

- <2017> 3rd year Broadband Service Certification
- <2018> 5th year Broadband Service Certification
- <2019> Interim Progress Certification
- <2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

<2021> Interim Progress Community Anchor Institutions

Name of Attached Document Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	532390
<015>	Study Area Name	OREGON - IDAHO - UTTI
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Doug Musgrave
<035>	Contact Telephone Number - Number of person identified in data line <030>	2086617802 ext
<039>	Contact Email Address - Email Address of person identified in data line <030>	doug_musgrave@lucelc.com.net

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3010) Progress Report on 5 Year Plan Milestone Certification (47 CFR § 54.313(f)(1)(i))

Name of Attached Document Listing Required Information

(3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313(f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

(3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

Name of Attached Document Listing Required Information

(3013) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) (Yes/No)

(3014) If yes, does your company file the RUS annual report (Yes/No)

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)

(3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

532390r2017.pdf

Name of Attached Document Listing Required Information

(3018) If the response is no on line 3014, is your company audited? (Yes/No)

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

(3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications

(3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3021) Management letter issued by the independent certified public accountant that performed the company's financial audit.

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

(3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,

(3023) Underlying information subjected to a review by an independent certified public accountant

(3024) Underlying information subjected to an officer certification.

(3025) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3026) Attach the worksheet listing required information

Name of Attached Document Listing Required Information

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	532390
<015> Study Area Name	OREGON-IDAHO UTIL.
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Doug Musgrave
<035> Contact Telephone Number - Number of person identified in data line <030>	2084617802 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	doug.musgrave@oiutelecom.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	OREGON-IDAHO UTIL.
Signature of Authorized Officer:	CERTIFIED ONLINE Date 06/26/2014
Printed name of Authorized Officer:	Doug Musgrave
Title or position of Authorized Officer:	Manager
Telephone number of Authorized Officer:	2084617802 ext.
Study Area Code of Reporting Carrier:	532390 Filing Due Date for this form: 07/01/2014
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.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	532390
<015> Study Area Name	OREGON-IDAHO UTIL.
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Doug Musgrave
<035> Contact Telephone Number - Number of person identified in data line <030>	2084617802 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	doug.musgrave@oiutelecom.net

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

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ 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 annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
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 AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data 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 Reporting Carrier:	
Name of Authorized Agent or Employee of Agent:	
Signature of Authorized Agent or Employee of Agent:	Date:
Printed name of Authorized Agent or Employee of Agent:	
Title or position of Authorized Agent or Employee of Agent:	
Telephone number of Authorized Agent or Employee of Agent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
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.	

Attachments

CONFIDENTIAL

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REDACTED - FOR PUBLIC INSPECTION

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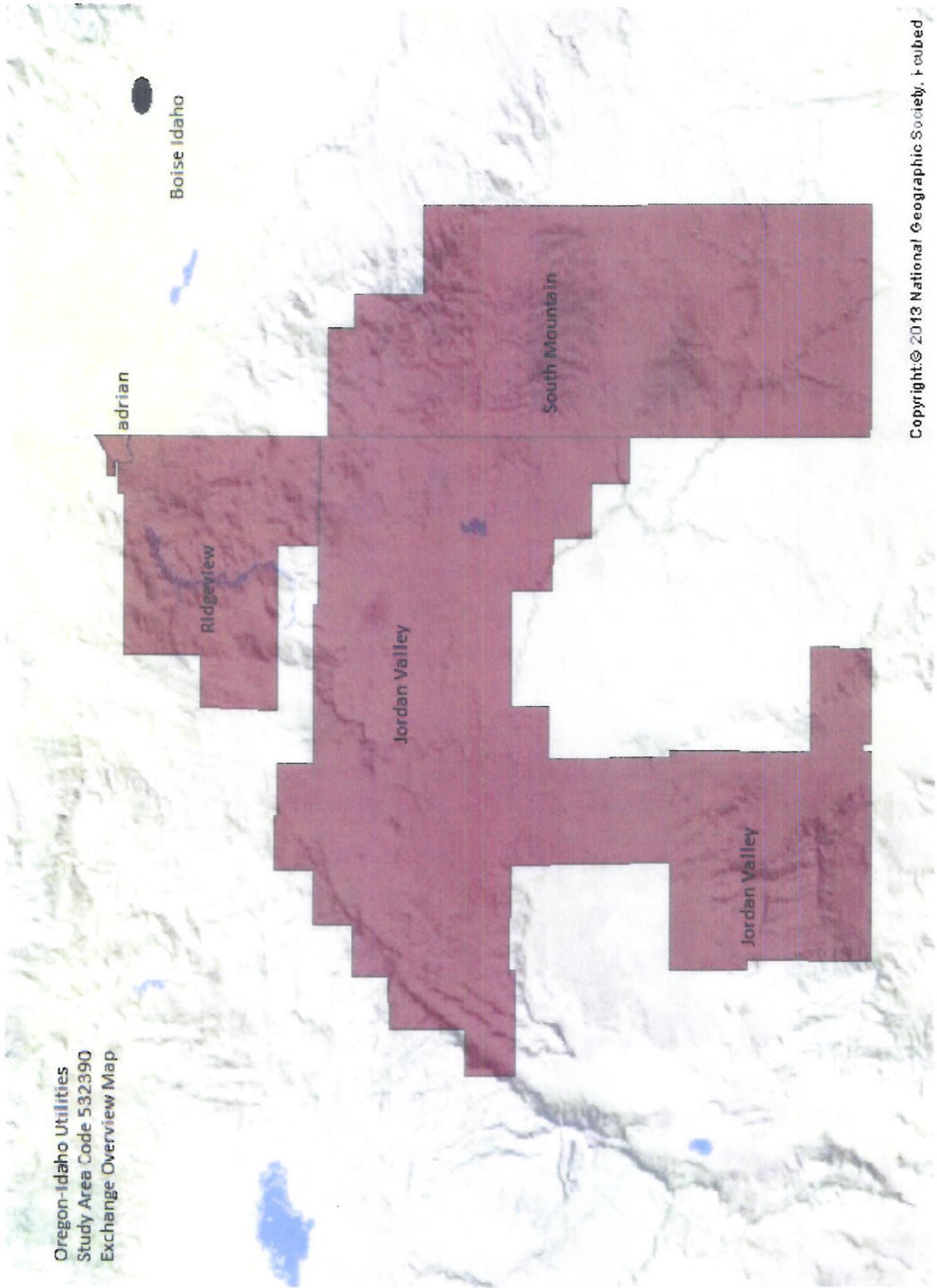
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Oregon-Idaho Utilities
Study Area Code 532390
Exchange Overview Map



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Oregon-Idaho Utilities
Serving Area Overview Map
June 20, 2014



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Line 510 Service Quality Standards & Consumer Protection Rules Compliance

Oregon-Idaho Utilities, Inc. complies with the service quality standards in the State of Oregon as defined under OAR 860-034-0390 Retail Telecommunications Standards for Small Telecommunications Utilities. Oregon-Idaho Utilities, Inc. complies with the service quality standards in the State of Idaho as defined under IDAPA 31.41.01 The Telephone Customer Relations Rules. Supervisory personnel periodically monitor activities and information about customer service orders and trouble reports in these states to insure service quality standards are being followed. Frequent interaction between supervisors and field and customer service staff helps to insure that each employee understands their role in following these standards.

Oregon-Idaho Utilities, Inc. complies with all applicable requirements on consumer protection rules including OAR 860-034-0390 Retail Telecommunications Standards for Small Telecommunications Utilities in the State of Oregon, IDAPA 31.41.01 The Telephone Customer Relations Rules in the State of Idaho, 47 CFR Part 64 Subpart U, Customer Proprietary Network Information, and the Federal Trade Commission Red Flag Rules. Employee training is held yearly on the requirements of each of the above as well as general training on disclosure of customer information to unauthorized parties. Supervisory personnel periodically monitor the activities of field and customer service personnel for compliance.

Line 610 Functionality in Emergency Situations Description

Oregon-Idaho Utilities, Inc. has engineered our communications network to remain functional in emergency situations as required by applicable state and federal regulations. Main Central office sites have emergency power generators that run automatically in the event of a commercial power loss. In addition, these sites have battery backup which will allow them to remain functional in the event of a loss of generator power. Second tier remote switch sites and remote concentrator sites have battery backup to continue operation in the event of a commercial power loss and the company has an inventory of portable generators which can be manually deployed to remain operational during extended commercial power loss events. Our class 5 switch and second tier remote sites have emergency stand alone capabilities to continue operation during an isolation event. All main switch, second tier remote switch, and remote concentrator sites have redundant transport paths allowing them to re-route traffic in the event of an emergency.

All switching, concentrator and transport equipment have redundant critical systems to continue operation during an internal card failure. We maintain a Rural Utilities Service recommended standard set of spare cards and parts in house for all mission critical systems. Routine maintenance is conducted on all mission critical systems. OIU also has an automated alarm monitor system in place that alerts company personnel of system malfunctions 24 hours a day, 7 days per week, 365 days per year. Our network was engineered to exceed generally accepted traffic handling standards within the industry to assure continued operation during traffic spikes and during busy hour and busy day events.

Line (1210) – Terms & Conditions of Voice Telephony Lifeline Plans

Oregon-Idaho Utilities does not have any service offerings specific to low income subscribers. Discounts to local service rates are available to qualified low income subscribers through the lifeline assistance program. Oregon-Idaho Utilities offers flat rate local service that includes unlimited calling within the defined local calling area, with access to 911 service, operator services, directory assistance, and Interexchange carriers. Oregon-Idaho Utilities does not offer toll service to our subscribers.

The below media ad was printed on a quarterly basis in The Argus Observer and The Owyhee Avalanche during 2013 informing the public, including those eligible for Lifeline, the availability of Oregon-Idaho Utilities telephone service.

OREGON-IDAHO UTILITIES, INC.



Wishes to inform the public of the availability of its telephone services which are offered in rural portions of Harney County, Malheur County, Oregon and Owyhee County, Idaho.

Oregon-Idaho's local service area includes the Oregon exchanges of Jordan Valley (prefix 541/586), Adrian (541/724) and Ridgeview (541/339) and the South Mountain (208/583) exchange in Idaho. Monthly service rates within these areas vary, depending on service location, and range from:

\$11.65 to \$20.05 plus \$6.50 federal end user charge for residential service, and

\$23.35 to \$34.85 plus \$6.50 federal end user charge for single line business service.

These rates include unlimited calling within the defined local areas, access to 911 services, access to operator services and directory assistance, and interexchange carrier access.

Low income individuals eligible for the Lifeline and Link-up assistance programs may be eligible for discounts from these basic service rates through the Oregon and Idaho telephone assistance programs and may also receive toll call blocking service without charge.

For information on our services or to place an order for service, contact the Oregon-Idaho Utilities, Inc., business office at:

(800) 624-0082

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