DOCKET NO. UM 1822

Cover Sheet for Submission of 2017 Annual ETC Certification Reports

Name of Eligible Telecommunications Carrier: Nehalem Telecommunications, Inc.
Filing date:June 15, 2017
Is this: Original submission? X OR
Revised submission?
Person to contact for questions:
NameTym Rutkowski
Phone number(509) 777-0137
E-mail addresstym.rutkowski@mossadams.com
Documents included in this filing (please check applicable items):
<u>X</u> CAF/ICC Support (47 CFR § 54.304)
<u>X</u> Rate Floor Data (47 CFR § 54.313(h))
Form 481 (High-cost per 47 CFR § 54.313, Low-income per 54.422) ¹
HUBB Portal Broadband Information ²
Form 690 (Mobility Fund per 47 CFR § 54.1009)
Affidavit for High-Cost Support

Filing deadlines: The Oregon 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 3, 2017. The CAF/ICC support data is due on the same day as the ETC's interstate access tariff filing (see FCC DA 17-258 for dates).

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.

² Federal Price Cap carriers only.

DOCKET NO. UM 1822

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.

FILING INSTRUCTIONS

Please file submissions for this year in Docket No. UM 1822. Include this cover sheet with each filing to indicate which documents are included. Please fill in all relevant items of information on the cover sheet.

Filings must be electronically submitted to the PUC Filing Center. You may e-mail documents to puc.filingcenter@state.or.us. Please note that the upload process is no longer an option for filing. See the PUC website for further instructions. If selected portions of documents are to receive confidential treatment, those portions should not be filed electronically. You may electronically file redacted versions of documents containing confidential information, but then follow-up by sending full versions including confidential information printed on yellow paper.

After filing electronically, please send two hard copies of the filing package (cover sheet and filed information) to the PUC Filing Center. Be sure to include the original affidavit with the raised seal or notary's mark evident. 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 send hard copy documents to the Filing Center via US mail using the following post office box address:

Public Utility Commission of Oregon Attn: Filing Center PO Box 1088 Salem, OR 97308-1088

If you send hard copy documents via means other than the US Postal Service, use the following address:

Public Utility Commission of Oregon Attn: Filing Center 201 High Street SE, Suite 100 Salem, OR 97301

If you have any questions regarding the reporting requirements, please contact Kay Marinos at 503-378-6730 or send an e-mail to Kay.Marinos@state.or.us.



2017 CAF ICC Data Collection

NECA Home NECA Data Collections Contact Us CAF ICC - Instructions & Documents Paper Certification Tracking Logout
Logged in User: Jaye Rishard

Study Area: NEHALEM TELECOMM. (ID: 532387)

Holding Company: RURAL TELEPHONE CO. (ID: 200000256)

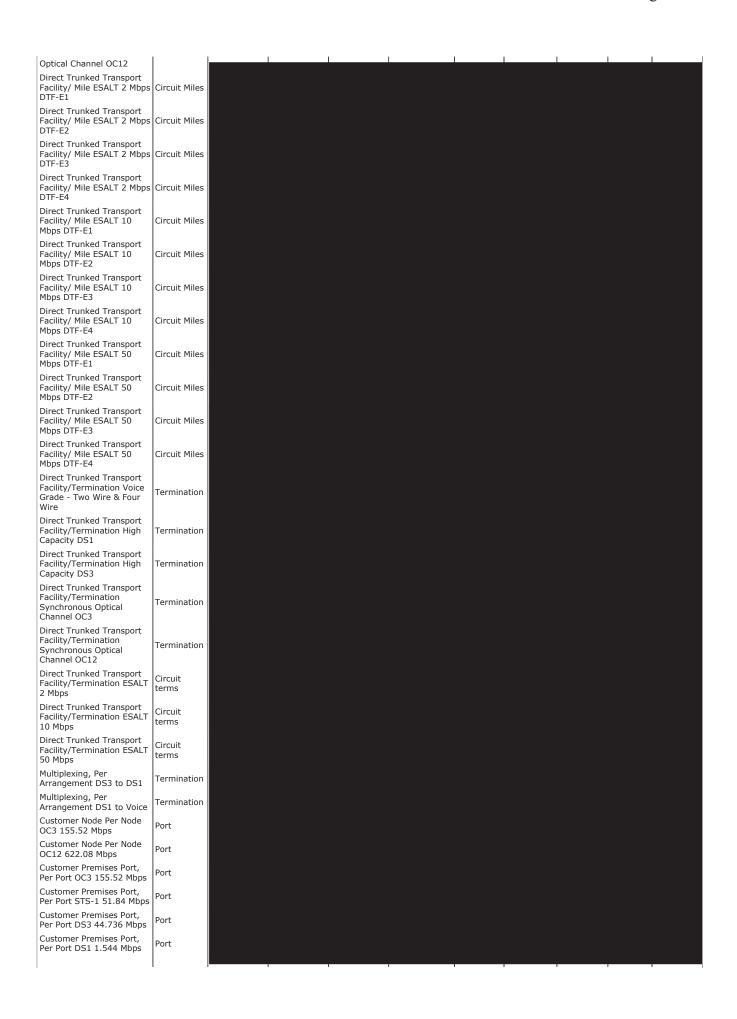
Intrastate Revenues (FCC TRP exhibit)

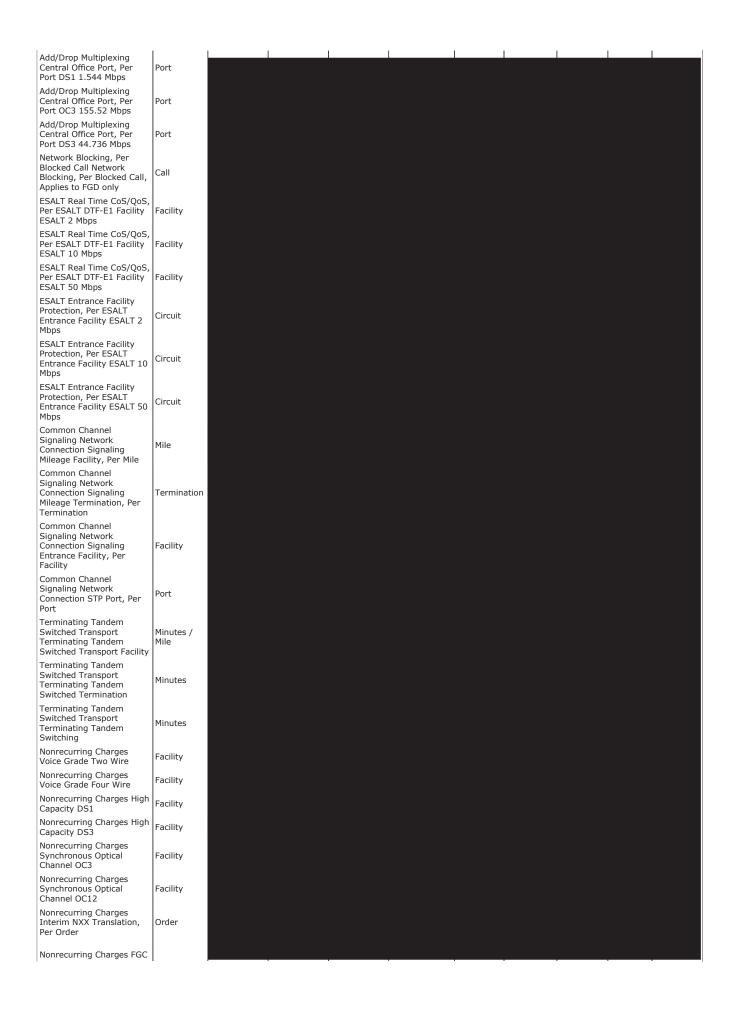
Option 1: View TRP Output in Excel
Option 2: Download TRP Data in Excel

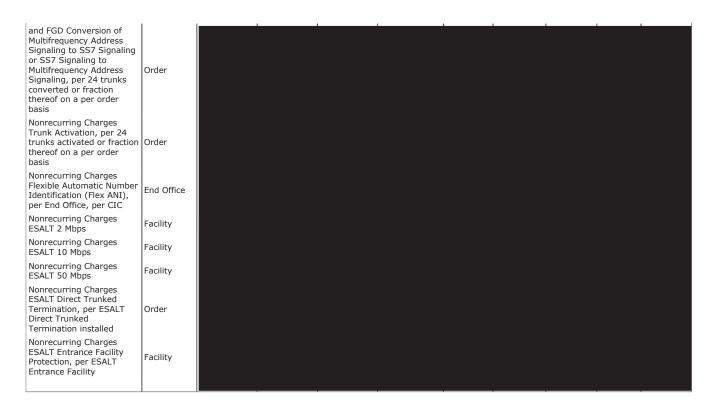
Intrastate Revenues

Test Year 2017-2018 Expected Maximum Intrastate Revenue:

Col D	Col E	Col F	Col G	Col H	Coll	Col J	Col K	Col L	Col M	Col N
Rate Element Description	Unit of Demand	7/1/2017 Interstate Rate	Test Year 2016-2017 Current Intrastate Rate	7/1/2017 Proposed Intrastate Rate	FY 2011 Intrastate Units: Terminating for Non-Dedicated or Originating and Terminating for Dedicated Elements	H*I Intrastate Price-out with 7/1/2017 proposed intrastate rate and FY2011 Demand	FY 2016 Intrastate Units: Terminating for Non- Dedicated and total for Dedicated Elements	Test Year 2017-2018 Forecasted Intrastate Units	[(L/K)^ (12/21)-1] *100 Intrastate Units Growth Rate %	H*L TY 2017-18 Forecasted Intrastate Revenue
Terminating End Office Access Service Terminating End Office, Premium, per access minute	MOU									
Terminating End Office Access Service Terminating End Office, Non-Premium, per access minute	MOU									
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	Mile									







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2017 CAF ICC Data Collection

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Home Select Company Main Page Study Area Data Input Menu

CAF & ARC Output

Historic Reports

E-Certification

Study Area: NEHALEM TELECOMM. (ID: 532387) Holding Company: RURAL TELEPHONE CO. (ID: 200000256)

Study Area USAC Reports

[View Printer-friendly report]

2017 USAC Data Report (Test Period 2017-2018)

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CONNECT AMERICA FUND

Data to be provided to USAC/FCC in June 2017 for CAF ICC Purposes

Current Settlement Type: Cost

	Test Period 7/1/17-6/30/18 Post True-up (Filing) View Rate-of-Return (ROR) Carrier Revenue Requirement	
1	2011 Interstate Switched Access Revenue Requirement	
	<u> </u>	
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 ^ 6)	
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 Intercarrier 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 15/16 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)	
	Revised CAF ICC Support with Imputed ARC Revenues for Broadband-Only Loops	
26	ARC Revenue Adjustment	
27	Adjusted Test Period 2017-2018 CAFICC Support (Line 25 - Line 26)	

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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Logged in User: Jaye Rishard

Study Area: NEHALEM TELECOMM. (ID: 532387) Holding Company: RURAL TELEPHONE CO. (ID: 200000256)

Access Recovery Charges

Recalculate ARC Rates & CAF Support revenues

Test Period 2017-18 Pre-True-up View Test Period 2017-18 Post-True-Up (Filing) View

	Te	est Period 2017-1	8 Pre-True-up Vi	ew Test P	eriod 2017	-18 Post-True-U	Jp (Filing) \	/iew		
		Test P	eriod 2017-2	2018 Pos	t True-U	p (Filing) V	iew			
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 ARG Revenue
Nehalem Study Area									ı	1
Summary										

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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 Nehalem	Telecommunic	ations Inc.		
Signature of Authorized Officer				_{Date} 05/23/2017
Printed name of Authorized Officer Mich	ael J. Martell			
Title or position of Authorized Officer ViCo	e-President			
Telephone number of Authorized Officer:	(208) 366-261			
Study Area Code of Reporting Carrier	532387	Filing Due Date for this form (mm/dd/yyyy)	6/16/2017	

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 Off	icer to Autho	rize an Agent to File Data Reported	on Behalf of Re	oorting Carrier
reporting carrier. I also certify that I am an	officer of the rep	or Association, Inc. (NECA) is authorize porting carrier; my responsibilities include en avided to the Authorized Agent are accurate.	d to submit the inform	nation reported on behalf of the of the data provided to the Authorized
Name of Authorized Agent National Exch	ange Carrier A	ssociation, Inc. (NECA)		
Name of Reporting Carrier Nehalem Te	lecommuni	cations Inc.		
Signature of Authorized Officer		1/1/14-		_{Date} 05/23/2017
Printed name of Authorized Officer Michae	I J. Martell			
Title or position of Authorized Officer Vice-F	President			
Telephone number of Authorized Officer: (20	08) 366-261	4 _{ext} .		
	532387	Filing Due Date for this form (mm/dd/yyyy)	6/16/2017	
	on this form can b	e punished by fine or forfeiture under the Commu	nications Act of 1934, S.C. § 1001.	47 U.S.C. §§ 502, 503(b), or fine or

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, this 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 Nehalen	n Telecomm	unications Inc.		
Signature of authorized officer			Date	05/23/2017
Printed name of authorized officer Mic	hael J. Mart	ell		
Title or position of authorized officer Vic	ce-Presiden	t		
Telephone number of authorized officer:	(20,8) 366-2	<u> </u>		
Study Area Code of Reporting Carrier	532387	Filing Due Date for this form (mm/dd/yyyy)	6/16/2017	
	<u> </u>			4 -4 -4 4004 47 H C C CC FOO

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 Nehalem	n Telecomm	unications Inc.		
Signature of authorized officer	11.0%	Mil	Date	05/23/2017
	hael J. Marte	ell		
Title or position of authorized officer Vic	ce-President	•		
Telephone number of authorized officer:	(<mark>208) 366-26</mark>	<u>à</u> .14		•
Study Area Code of Reporting Carrier	532387	Filing Due Date for this form (mm/dd/yyyy)	6/16/201	7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
	tements on this forr	n can be punished by fine or forfeiture under the	e Communications	s Act of 1934, 47 U.S.C. §§ 502,

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.

3060-0986
I Number
MB Contro
9
ECTION
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Block 1 - Contact Information

ROW#	DATA ELEMENT	FORMAT OF REQUESTED DATA	T OF TED		RESPONSE	
~	Carrier Study Area Code	6 numeric digits	fs 532387			
2	Carrier Study Area Name	alpha characters		-EM TELECOMMU	NEHALEM TELECOMMUNICATIONS, INC. DBA NEHAL	IT.
3	Service Provider Identification Number	9 numeric digits	ts 143002628	2628		
4	Residential Local Service Charge Effective Date	mm/dd/yy	06/01/17	17		
2	Contact Name	alpha characters		Arrington, Beverly A		
9	Contact Telephone Number (include area code)	9 numeric digits		208-366-2614		
7	Sheet Number	numeric digit(s)) (s			
80	Total Number of Sheets	numeric digit(s)	(s			
		Block 2- Residential L	Block 2- Residential Local Service Rates, Fees, and Line Counts	es, and Line Coun	χ	
	Column 1 Column 2 Residential I ocal State Subscriber	Column 3 State Universal	Column 4 Manditory	Column 5	Column 6	Column 7
		Service Fee	Extended Area Service Charge		Zone Name	2000
6					Nehalem	Residential
10					Nehalem	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 National Exchange Carrier Association (NECA) Name of Reporting Carrier Nehalem Telecommunications Inc. Signature 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) 07/01/2017

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	Telecommunication	ons Inc.		
Signature of authorized officer	1/1/1/2	10%	200	Date 06/13/2017
Printed name of authorized officer Mich	nael J. Martell			
Title or position of authorized officer ViC	ce-President			24-25
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)	07/01/2017	