

Annual Recertification Reports for ETCs in Oregon

Report Formats to Satisfy Requirements of Order No. 06-292 for 2006

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 No 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 that receive high-cost and access-related support*

Report #8 Special Commitments/Requirements – *CETCs only*

Report #9 Certifications – *All ETCs*

- 9.1. IAS or ICLS Certification Copy – *All ETCs Receiving IAS/ICLS*
- 9.2. Certification of Use of Universal Service Funds – *All ETCs Receiving Traditional High-Cost Support*
- 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 *company name, tariff number, section and page numbers*) for the basic local usage offerings and corresponding rates are:

1. residence: See Attached : Report 1.1, A, 1 & 2 (Sheets 1-6)

2. business: Same as above

B. 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. Comparable Local Usage Plan – CETCs only

The carrier certifies that it offers at least one basic local usage plan that is comparable to those offered by the ILECs in its designated service area: yes ___ no ___

Identify which of the plans in 1.1.B above are “comparable” to the ILEC local usage offerings, and explain the basis for the comparability. _____

1.3. Supported Services Not Provided – CETCs only

Identify any supported services that were not available at designation, but were to be provided as a condition of ETC designation (e.g., toll restriction for qualifying low-income consumers, E911): _____

Are these services provided currently? yes ___ no ___

If no, explain why not: _____

1.4. Equal Access Acknowledgement – CETCs only

The carrier acknowledges that it may be required to provide equal access if it is the only remaining ETC in an area: yes ___ no ___

Report #2 – Unfulfilled Service Requests

2.1. Unfulfilled Service Requests/Held Orders – All ETCs

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

A. Service quality reports for “primary held orders over 30 days” were filed with the Oregon PUC for calendar year 2005. No additional submission is required for recertification purposes.

B. Service quality reports for “primary held orders over 30 days” were **not** filed with the Oregon PUC for calendar year 2005. In this case, choose **one** of the following alternatives for reporting:

1. The number of customer requests for supported services that were not fulfilled during calendar year 2005: _____.
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.
2. The number of “primary held orders over 30 days” (as defined in Section 860-034-0390 of the Oregon Commission rules) for calendar year 2005: _____.
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 2005 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 2005.

See Attached: Report 3 (Sheet 1 of 1)

Report #4 – Low-income Services – All ETCs

4.1. Number of Lifeline Customers

The total number of customers receiving lifeline discounts during the month of December 2005 in the designated service area: 225.

CETCs only: also list counts by ILEC service area:

<u>ILEC Svc Area</u>	<u>No. of Lifeline customers</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

4.2. Advertising of Low-Income Program Service Offerings

Submit copies of all advertisements (for all media) for Lifeline, LinkUp, and OTAP service offerings that were run during calendar year 2005, noting media (newspaper name, radio station, bill inserts, internet postings, etc.), run/distribution dates, and geographic coverage area.

See attached: Report 4.2 (Sheets 1-2)

Report #5 – Outage Report – All ETCs

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

- A. X The number of service outages, as defined in Section 860-034-0350 (9) of the Oregon PUC rules, that occurred during calendar year 2005: 0.
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.
- B. _____ The number of service outages, as defined in FCC rules at 47 CFR Section 54.209(a)(2), that occurred during calendar year 2005: _____.
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 either A. or B. below, as appropriate:

A. X Trouble reports were filed with the Oregon PUC for calendar year 2005 per Oregon PUC service quality rules. No additional submission is required for recertification purposes.

B. _____ Trouble reports were **not** filed with the Oregon PUC during calendar year 2005. In this case, choose **one** of the following alternatives for reporting:

1. _____ The number of customer trouble reports received per 100 wireless handsets for supported services during calendar year 2005, for each company switch.

<u>Trouble Type</u>	<u>Switch A (location)</u>	<u>Switch B (location)</u>
No service	_____	_____
Network busy	_____	_____
Interruption of service	_____	_____
Poor reception	_____	_____

2. _____ The number of customer trouble reports, as defined in Section 860-034-0390 (5) of the Oregon PUC rules, received during calendar year 2005: _____ per 100 working access lines.

Report #7 – Network Improvement Plan – CETCs Only

The following detailed information must be included in each network improvement plan. Only CETCs must file these plans for recertification purposes. 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 format laid out in the attached Excel worksheets to provide information required in the outline below (taken from the UM 1217 order), rather than use some other format developed by the CETC.

7.1. Demonstration of use of support funds (other than low-income funds) received during 2005, including:

- 7.3.1.1. The amount of support funds, by type, received during the year.
- 7.3.1.2. Year-end counts of eligible lines/handsets in service for each ILEC service area as they were reported to USAC for the past December.
- 7.3.1.2. Identification of each project for which the support was used, the actual support expenditures (by amount and type) for each project, and status of project (completed or still in progress).
- 7.3.1.3. The resulting benefits to consumers (qualitative and quantitative) from each project and updates to coverage and signal strength maps.
- 7.3.1.4. Explanation of how and why actual spending of support funds differed from spending proposed in the previous network improvement plan.
- 7.3.2. Updates to network improvement plan for the current calendar year and the following year:
 - 7.3.2.1. Forecast of support amount, by type (LSS, HCL, ICLS, IAS), that the applicant expects to receive during each of the next 2 years, as well as an explanation of how the forecast was derived.
 - 7.3.2.2. Detailed information for each project that will use support funds:
 - 7.3.2.2.1. Description and purpose of the project, its physical location and the ILEC serving that area.
 - 7.3.2.2.2. The start date and completion data (by quarter).
 - 7.3.2.2.3. Amount of support money allocated to the project, in total and broken down by investment and expense types.
 - 7.3.2.2.4. The amount of company's own funds that will be used for each supported project.
 - 7.3.2.2.5. Brief explanation of why the carrier would not make these improvements without the availability of support funding.
 - 7.3.2.2.6. Quantification of resulting service improvements by type (increased coverage, signal strength, capacity, etc.), population benefited, and geographic area benefited (shown on map).

Report #8 – Special Commitments/Requirements – CETCs only

Did the Oregon PUC impose any special commitments or requirements at initial designation or during the previous annual recertification process? yes ____ no ____.

If yes, identify the commitments or requirements and explain if, and how, they have been met.

Report #9 – Certifications - All ETCs

9.1. IAS or ICLS Certification Copy – All ETCs Receiving IAS/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 2006.

9.2. Certification of Use of Universal Service Funds – All ETCs receiving HCL/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.



CASCADE UTILITIES

P.O. Box 189, Estacada, Oregon 97023, Telephone (503) 630-4202
Fax (503) 630-8934

June 9, 2006

Marlene H. Dortch
Office of the Secretary
Federal Communications Commission
445 12th St., SW
Washington, DC 20554

Karen A. Majcher
Vice President – High Cost & Low Income Division
Universal Service Administrative Company
2000 L Street, N.W. Suite 200
Washington, DC 20036

RE: CC Docket No. 96-45

This is to certify that **CASCADE UTILITIES, INC.** will use its Interstate Common Line Support – ICLS only for the provision, maintenance, and upgrading of facilities and service for which the support is intended.

I am authorized to make this certification on behalf of the company named above. This certification is provided for all study areas under the common control of the company, and which are listed below.

Signed,

Brenda Crosby
President
Cascade Utilities, Inc.
P.O. Box 189
Estacada, OR 97023

Date: 6/14/06

Name
Cascade Utilities, Inc.

State
Oregon

Study Area No.
532371



The FCC Acknowledges Receipt of Comments From ...
Cascade Utilities, Inc.
 ...and Thank You for Your Comments

Your Confirmation Number is: '2006627421157 '	
Date Received:	Jun 27 2006
Docket:	96-45
Number of Files Transmitted:	1

DISCLOSURE

This confirmation verifies that ECFS has received and accepted your filing. However, your filing will be rejected by ECFS if it contains macros, passwords, redlining, read-only formatting, a virus or automated links to source documents that is not included with your filing. Filers are encouraged to retrieve and view their filing within 24 hours of receipt of this confirmation. For any problems contact the Help Desk at 202-418-0193.

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updated 12/11/02

AFFIDAVIT CERTIFYING USE OF UNIVERSAL SERVICE FUNDS

I, Brenda Crosby, being of lawful age and duly sworn, on my oath, state that I am the President [an officer] of Cascade Utilities, Inc. ("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.

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 purposes 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 upgrading 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 services in urban areas.

DATED this 12th day of July, 2006.

Cascade Utilities, Inc. (Company)

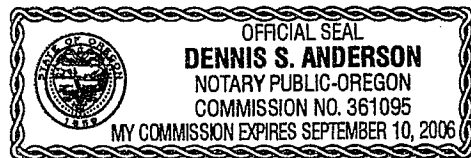
By: Brenda Crosby (Name)

Its: President (Title)

SUBSCRIBED AND SWORN to before me this 12th day of JULY, 2006.

[Signature]
Notary public in and for the State of Oregon

My Commission Expires: 9-10-06



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

I, Brenda Crosby, being of lawful age and duly sworn, on my oath, state that I am the President [an officer] of Cascade Utilities, Inc. ("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):
 - 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 12th day of July, 2006.

Cascade Utilities, Inc. (Company)

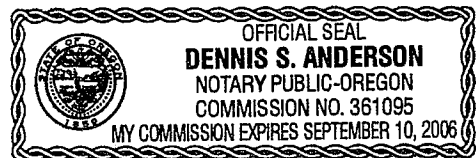
By: Brenda Crosby (Name)

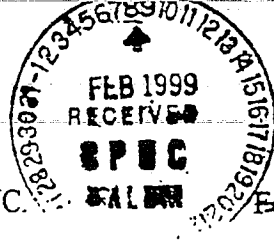
Its: President (Title)

SUBSCRIBED AND SWORN to before me this 12th day of JULY, 2006.

[Signature]
Notary public in and for the State of Oregon

My Commission Expires: 9-10-06





CASCADE UTILITIES, INC.

Thirty-First
 Fourteenth Revised Sheet No. 100 - Supplement A

LOCAL SERVICE

LOCAL ACCESS LINE RATES

RATES

Trunks, and one-party apply within the base rate area and supplementary base rate areas. Multi-party applies in suburban areas. Trunks, and one-party can be provided in suburban areas for additional charge (mileage). Monthly rates are:

	Business Rates			Residence Rates	
	Key System Line	Payphone Line	One Party	One Party	
	CSOC	CSOC	CSOC	CSOC	CSOC
	104	103	110	101	203
	35.66	35.66	35.66	29.72	15.24
ESTACADA					
CORBETT					
ELKTON					
ASH VALLEY					
MT HD MDWS &					
RIFFLEBROOK					
MEDICAL SPRINGS					
HAINES					
SCOTTSBURG					

EXTENDED AREA SERVICE (EAS)

RATES

Flat Rate Option (All Exchanges)

Flat Rate EAS provides for unlimited calling to available EAS regions. Charges are dependent upon the number of EAS customers which can be called. The rates listed below become effective October 2, 1999.

Monthly rates are as follows:

Number of EAS Customers Accessible	Business Rates	Residence Rates	Applicable Exchanges @ 10/2/99
0001 - 1500	\$ 2.00	\$ 1.00	None
1501 - 5000	\$ 8.00	\$ 4.00	Scottsburg, Ash Valley
5001 - 15000	\$12.00	\$ 6.00	Medical Springs
15000 - 50000	\$14.00	\$ 7.00	Elkton, Haines
50000 +	\$21.30	\$10.65	All Other

Measured Rate Option (All Exchanges)

Charges for optional Measured EAS are based upon each minute of use or fraction thereof. Measured EAS is not available to grandfathered multi-party service. The rate for Measured EAS for residential and business service is \$0.05 per minute, or fraction thereof. (Material found on this Sheet was formerly found on Sheet 100.1).

ADVICE NO. 124

ISSUED October 15, 1998 EFFECTIVE October 2, 1999

ISSUED BY CASCADE UTILITIES, INC. TITLE Vice President

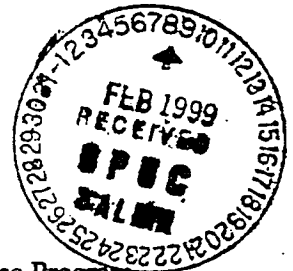
By Brenda Crosby

CASCADE UTILITIES, INC

LOCAL SERVICE

LOCAL ACCESS LINE RATES

RATES, Continued



The rates on the preceding sheet do not include the customer premises inside wire. Service Assistance Program surcharge, the telephone instrument or other terminal equipment, except one coin telephone instrument is included with semipublic service.

Oregon Telephone Assistance Program (OTAP) Credit

The above rates do not include the Oregon Telephone Assistance Program (OTAP) credit. Effective April 1, 1989, qualifying customers receive a \$3.50 reduction from the above rates for the single line which serves the customer's principal residence.

EAS CALLING AREAS

FROM	TO			
Estacada & Corbett	Beaver Creek	Beaverton	Burlington	Charbonneau
	Corbett	Forest Grove	Gresham	Hillsboro
	Lake Oswego	Milwaukie	N. Plains	Oregon City
	Portland	Redland	Sandy	Scholls
	Sherwood	Stafford	Summyside	Tigard
	Canby	Newberg	Yamhill	Aurora
	Estacada	Hoodland	Molalla	Scappoose
	Carlton	Colton	Vernonia	Woodburn
Elkton	Scottsburg	Roseburg	Oakland/Sutherlin	N
Scottsburg	Elkton	Reedsport		
Medical Springs	Baker			
Haines	Baker	N. Powder	La Grande	
Ash Valley	Reedsport			

Extended Area Service (EAS) provides interexchange telephone service to the customer at either a flat rate per month or an optional measured rate per minute. Extended Area Service does not include calls the customer makes within the customer's serving exchange.

For customers in exchanges which receive EAS, those customers shall be permitted to change Extended Area Service options for a six month period without incurring a fee for the change.

ADVICE NO. 124

ISSUED October 15, 1998

EFFECTIVE October 2, 1999

ISSUED BY CASCADE UTILITIES, INC.

TITLE Vice President

BY Brenda Crosby

PUC OR. NO. 6

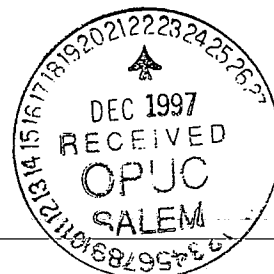
Original Sheet No. 100.3

CASCADE UTILITIES, INC.

LOCAL SERVICE

LOCAL ACCESS LINE RATES

RATES



Oregon Telephone Assistance Program (Lifeline or OTAP)
And Link Up Program

Oregon Telephone Assistance Program (Lifeline or OTAP)

Lifeline provides for a discount against the recurring monthly rate for the provision of local residential service for certain low-income customers. Lifeline, and Link Up are joint State and Federal Programs pursuant to 47 C.F.R. Subpart E, 54. In order to be eligible for Lifeline, subscribers must meet the requirements for the Oregon Telephone Assistance Program as defined in OAR 860-033-0030.

Lifeline subscribers may subscribe to toll blocking at no extra charge. Toll blocking is a service provided that allows OTAP recipients to elect not to allow the completion of outgoing toll calls from their telecommunications circuit (OAR 86-033-0005(9)). Lifeline subscribers who subscribe to toll blocking will not be required to pay service deposits in order to initiate service.

Lifeline subscribers will not be disconnected for non-payment of toll charges, regardless of whether toll blocking is activated on their service. Partial payments received from Lifeline subscribers will be first applied to local service and then to toll charges.

Lifeline will not be furnished with Foreign Exchange service.

ADVICE NO. 120

ISSUED: December 22, 1997

EFFECTIVE: January 1, 1998

ISSUED BY: CASCADE UTILITIES, INC

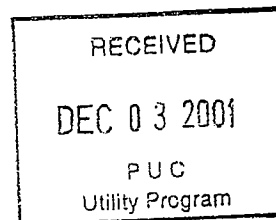
TITLE: Vice President

BY: Brenda Crosby

CASCADE UTILITIES, INC.

LOCAL SERVICE

LOCAL ACCESS LINE RATES



RATES (continued)

Oregon Telephone Assistance Program (Lifeline or OTAP)
And Link Up Program (continued)

The following services are included in Lifeline:

- Single-party, voice-grade access to the Public Switched Network
- Access to emergency services
- Access to operator services
- Access to interexchange services, unless toll blocking is chosen
- Access to directory assistance
- Toll Blocking

The discount will begin with the date the company receives a valid application from the customer or when new service is established for a qualifying customer. The discount will be prorated from the effective date of the customer's application. The discount is applicable only to one access line at a residential customer's principal residence.

The reductions to be applied to the residential one-party rate are as follows:

Baseline Federal Lifeline Reductions	\$5.00	*	C
Supplemental Federal Reduction	1.75		
State Supported Reduction (OTAP)	3.50		
Additional Federal Reduction*	1.75		
*(equal to 1/2 of OTAP amount)			
Total	\$12.00		C

These reductions are from the normal residential one-party service subscribed to by the subscriber. The Baseline Federal Lifeline Reduction shall be used to waive the subscribers' Federal End User Common Line charge or SLC.

* Note: This may increase up to \$6.00 July 1, 2002 and up to \$6.50 July 1, 2003. N

ADVICE NO. 131

ISSUED: November 30, 2001

EFFECTIVE: January 1, 2002

ISSUED BY: CASCADE UTILITIES, INC.

TITLE: Vice President

BY: Brenda Crosby

PUC OR. NO. 6

Original Sheet No. 100.5

CASCADE UTILITIES, INC.

LOCAL SERVICE

LOCAL ACCESS LINE RATES

RATES (Continued)



Oregon Telephone Assistance Program (Lifeline or OTAP)
And Link Up (Continued)

LINK-UP PROGRAM

Subscribers who meet the requirements for Lifeline are eligible for the Federal Communication Commission's Link Up Program. A qualifying low-income subscriber may choose one or both of the following programs:

- a. A reduction in the customary charge for connecting service at the subscriber's principal place of residence which shall be half the connection charge, or \$30.00 whichever is less; and
- b. A deferred schedule for payment of the charges assessed for commencing service, for which the subscriber does not pay interest. The interest charges not assessed to the subscriber shall be for connection charges of up to \$200.00 that are deferred for a period not to exceed one year. Charges assessed for commencing service include any charges that the company customarily assesses to connect subscribers to the network. These charges do not include any permissible security deposit requirements.
- c. A carrier's Link Up program shall allow a consumer to receive the benefit of the Link Up program for a second or subsequent time only for a principal place of residence with an address different from the residence address at which the Link Up assistance was provided previously.

ADVICE NO. 120

ISSUED: December 22, 1997

EFFECTIVE: January 1, 1998

ISSUED BY: CASCADE UTILITIES, INC.

TITLE: Vice President

BY: Brenda Crosby

P.U.C. NO 6

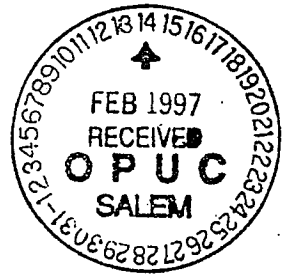
Fifth Revised Sheet No. 101

CASCADE UTILITIES, INC.

LOCAL SERVICE

ACCESS LINE RATES

CONDITIONS



Local service is provided through facilities owned and maintained according to the standards of the Company. The territory served is shown on maps filed with the Commissioner by the Company. This territory is referred to as an Exchange. Within the Exchange are base rate areas, suburban areas and, occasionally, supplementary base rate areas. Trunks, one and two-party service are provided in the base rate areas and supplementary base rate areas normally and in the suburban areas with additional charges. Multi-party service is provided normally in the suburban areas and not offered in the base rate area.

The application of business or residence rates is determined by the actual or obvious use made of the service by the customer. Where only one primary access line is provided at a location which is both business and residence, the business rate will apply. Flat rate service will not be installed on premises of a payphone in a location where a telephone connected to the access line would be accessible for use by the patrons of the customer or by the public in general.

Local service rates include the line which provides access to the central office switching equipment. Customer premise equipment (CPE) premise inside wire is excluded. C

Long distance charges will apply on any calls placed with the assistance of an operator or if the DDD code is dialed.

ADVICE NO. 118

ISSUED February 14, 1997

EFFECTIVE April 15, 1997

ISSUED BY CASCADE UTILITIES, INC

TITLE Vice President

BY Brenda Crosby

9359

COMMUNITY NEWSPAPERS

P.O. BOX 370 PHONE (503)684-0360
BEAVERTON, OREGON 97075

Legal Notice

Legal Notice Advertising

- Cascade Utilities
- PO Box 189
- Estacada, OR 97023
- Tearsheet Notice
- Duplicate Affidavit

IMPORTANT NOTICE FROM CASCADE UTILITIES INC.

Cascade Utilities Inc. is a quality telecommunications service provider that provides basic and enhanced services at reasonable rates within its service territory. Basic services are offered at the following rates:

Monthly Service Charge Ranges:

- Single Party Residence Service: \$15.24
- Single Party Business Service: \$29.72
- Federal Subscriber Line Charge - Single Line \$6.50
- Directory Assistance: Charges are based on your interexchange provider's rates.
- Touch Tone Service: Touch Tone Service is provided as a part of local service rate.

-Toll Blocking: Available at no charge for qualifying low income customers.

-Emergency 911 Services: Surcharges for 911 services are assessed according to government policy.

Low-Income individuals may be eligible for Federal and State Lifeline and Link-up telephone assistance programs, which include discounts from the above basic local service charges. Basic services are offered to all consumers in the Cascade Utilities, Inc. service territories at the rates, terms and conditions specified in our Company's local tariff. If you have any questions regarding the company's services, please call us at 503-630-4202.

As published in Estacada News Dec. 14, 2005.

AFFIDAVIT OF PUBLICATION

STATE OF OREGON,
COUNTY OF CLACKAMAS,) ss.

I, Clinton Vining
being first duly sworn, depose and say that I am the Advertising Director, or his principal clerk, of the Estacada News a newspaper of general circulation as defined in ORS 193.010 and 193.020; published at Estacada in the aforesaid county and state; that the Notices from Cascade Utilities

a printed copy of which is hereto annexed, was published in the entire issue of said newspaper for 1 successive and consecutive in the following issues:

Dec. 14, 2005

Clinton Vining
Notary Public for Oregon

Subscribed and sworn to before me this 23rd day of December 2005

Robin A. Burgess
Notary Public for Oregon

My Commission Expires:

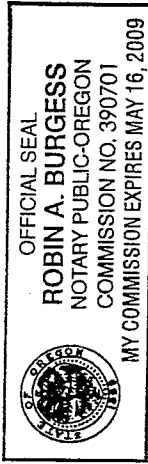
AFFIDAVIT

Acct. # 265119

INVOICE

Amount Due \$ 57.82 Case: EN 9359

RECEIVED
DEC 27 2005



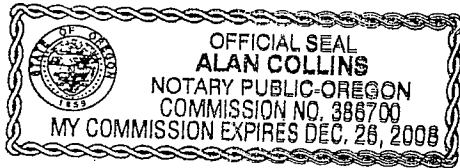
Practically Indispensable.

1320 SW Broadway, Portland, OR 97201-3499

Affidavit of Publication

Darlene Dorman, duly sworn depose and say that I am the Principal Clerk Of The Publisher of The Oregonian, a newspaper of general circulation, as defined by ORG 193.010 and 193.020, published in the city of Portland, in Multnomah County, Oregon; that the advertisement, the printed text of which is shown below, was published without interruption in the entire and regular issue The Oregonian or the issue on the following dates:

2/14/2005



Darlene Dorman

Principal Clerk of the Publisher:

12/15/05

Subscribed and sworn to before me this date:

Alan Collins

Notary:

Ad Order Number: 0001635322

IMPORTANT NOTICE FROM CASCADE UTILITIES

CASCADE UTILITIES, INC. is a quality telecommunications service provider that provides basic and enhanced services at rea-sonable rates within its service territory. Basic Services are offered at the following rates:

Monthly Service Charge Ranges

Single Party Residence Service: \$15.24 Single Party Business Service: \$29.72 Federal Subscriber Line charge - single line: \$6.50 Directory Assistance Charges are based on your interexchange provider's rates Touch Tone Service: Touch Tone is provided as a part of local service rate. Toll Blocking: Available at no charge for qualifying low income customers Emergency 911 Services: Surcharges for 911 services are assessed according to government policy. Low-income individuals may be eligible for Federal and State Lifeline and Link-up telephone assistance programs which include discounts from the above basic local service charges. Basic Services are offered to all consumers in the Cascade Utilities, Inc. service territories at the rates, terms, and conditions specified in our Company's services, please call us at 503-630-4202.



The Oregonian Order Confirmation for Ad #0001635322

Customer Name Cascade Utilities
Customer Phone 503-630-8962
Account # 2000134932
Customer Address
 PO Box 189,303 SW Zobrist
 Estacada OR 97023 USA

Payor Name Cascade Utilities
Payor Phone 503-630-8962
Account # 2000134932
Payor Address
 PO Box 189,303 SW Zobrist
 Estacada OR 97023 USA

Sales Rep.
 zzNoticesRep
Ordered By
 Sharon Day

Customer Fax 503-630-8934
Customer EMail
 25-482

Total Amount \$206.70
Payment Amt \$0.00
Amount Due \$206.70

Primo Type C-Legal Ad 1x
Special Pricing None
Attributes
Tear Sheets 0
Proofs 0
Affidavits 1

Ad Size 1.0 X 42 LI
Color <NONE>
Materials

Payment Method
Invoice Text

Product:Edition:Zone
 Oregonian:All:None
Run Dates 12/14/2005
Sort Text IMPORTANTNOTICEFROMCASCADEUTILITIESCASCADEUTILITIESINCAQUALITYTELECOMMUNICATIONSSERVICEPROVIDERTH
Run Schedule Invoice Text IMPORTANT NOTICE FROM CASCADE UTILITIES CASCADE UTILITIES, INC.

Inserts
 1

Placement
 C-Notices - Classified
Position
 008-Public Notices

Inserts
 1

Product:Edition:Zone
 Online:All:None
Run Dates 12/14/2005
Sort Text IMPORTANTNOTICEFROMCASCADEUTILITIESCASCA
Run Schedule Invoice Text IMPORTANT NOTICE FROM CASCADE UTILITIES

Placement
 C-Notices - Classified
Position
 008-Public Notices

Ad Content Proof
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 CASCADE UTILITIES
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 quality telecommunications serv-
 ice provider. We provide basic
 and enhanced services at rea-
 sonable rates within its ser-
 vice territory. Basic Services are of-
 fered at the following rates:
 • Monthly Service Charge Ranges
 • Single Party Residence Service:
 • Single Party Business Service:
 • Federal Subscriber Line Charge
 • Single Line: \$1.50
 • Directory Assistance Charge
 • Interexchange (Long Distance)
 • Touch Tone Service: Touch
 Tone is provided as a part of
 local service rate.
 • Toll Blocking: Available at no
 charge for qualifying low income
 customers.
 • Exchange (911) Services: Sur-
 charges for 911 services are as-
 sessed according to government
 policy.
 Low-income individuals may be
 eligible for Federal and State Life-
 line and Lift-up programs assist-
 ing customers with low income
 discounts from the above basic
 service charges. Basic Serv-
 ices are offered to all consumers
 in the Cascade Utilities, Inc. serv-
 ice territories at the rates, terms,
 and conditions specified in our
 Company's services, please call
 us at 503-630-4282.