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JUN 29 2012

PUBLIC SERVICE COMMISSION

June 29, 2012

North Dakota Public Service Commission
Darrell Nitschke, Executive Secretary
600 E. Boulevard, Dept. 408
Bismarck, ND 58505-0480

RE: CAF/ICC Compliance Filing for §54.309

Dear Mr. Nitschke:

Enclosed are the original and one copy of the filing documents for the annual reporting requirements pursuant to Section 54.309 of the Federal Communications Commission's rules. Enclosed are the 2012 data reports and certifications for Nemont Telephone Cooperative, Inc. - ND, Study Area Code 382247 that was filed with the FCC and USAC.

If you have any questions feel free to contact me at 406-783-2281 or jodie.richardson@nemont.coop.

Sincerely,

Jodie Richardson
Regulatory Compliance Coordinator

cc: emailed to ndpsc@nd.gov

Enclosures

2 **PU-12-512** Filed: 6/29/2012 Pages: 5
Copy of FCC 47CFR Section 54.304 CAF ICC Annual
Support Data

Nemont Telephone Cooperative, Inc.

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: NEMONT TEL COOP - ND

Signature of Authorized Officer or employee: **Remi Sun**

Digitally signed by Remi Sun DN:cn=Remi Sun,email=remi.sun@nemont.coop,O=nemont tel coop - nd,l=Scobey MT 59263-0600, Date:5/24/2012

Date: 5/24/2012

Printed name of Authorized Officer or employee: Remi Sun

Title or position of Authorized Officer or employee: CFO

Telephone number of Authorized Officer or employee: 406-783-2358

Study Area Code of Reporting Carrier

382247

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

6/18/2012

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				
<p>I certify that (Name of Agent) <u>National Exchange Carriers Association, Inc.</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 data provided to the Authorized Agent; and, to the best of my knowledge, the actual data provided to the Authorized Agent is accurate.</p>				
Name of Authorized Agent : National Exchange Carriers Association, Inc.				
Name of Reporting Carrier: NEMONT TEL COOP - ND				
Signature of Authorized Officer: Remi Sun			Digitally signed by Remi Sun DN:cn=Remi Sun,email=remi.sun@nemont.coop,O=nemont tel coop - nd,l=Scobey MT 59263-0600, Date:5/24/2012 Date: 5/24/2012	
Printed name of Authorized Officer: Remi Sun				
Title or position of Authorized Officer: CFO				
Telephone number of authorized officer: 406-783-2358				
Study Area Code of Reporting Carrier	382247		Filing Due Date for this form (mm/dd/yyyy)	6/18/2012
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.

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: NEMONT TEL COOP - ND

Signature of Authorized Officer: **Remi Sun**

Digitally signed by Remi Sun DN:cn=Remi Sun,email=remi.sun@nemont.coop,O=nemont tel coop - nd,l=Scobey MT 59263-0600, Date:5/24/2012

Date: 5/24/2012

Printed name of Authorized Officer: Remi Sun

Title or position of Authorized Officer: CFO

Telephone number of Authorized Officer: 406-783-2358

Study Area Code of Reporting Carrier

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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: NEMONT TEL COOP - ND

Remi Sun

Digitally signed by Remi Sun DN:cn=Remi Sun,email=remi.sun@nemont.coop,O=nemont tel coop - nd,l=Scobey MT 59263-0600, Date:5/24/2012

Date: 5/24/2012

Signature of Authorized Officer or employee:

Printed name of Authorized Officer or employee: Remi Sun

Title or position of Authorized Officer or employee: CFO

Telephone number of Authorized Officer or employee: 406-783-2358

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