



Study Area: BEK COMM. COOP. (ID: 381604)

CONNECT AMERICA FUND

Data to be Provided to USAC/FCC for CAF ICC Purposes - Will Be Provided Concurrent with 2013 Annual Tariff Filing

Settlement Type: Cost**7/02/13-6/30/14 Test Period**

Rate-of-Return (ROR) Carrier Revenue Requirement		
1	2011 Interstate Switched Access Revenue Requirement	\$612,469
2	FY 2011 Intrastate Terminating Switched Access Revenues	\$601,516
3	FY 2011 Net Reciprocal Compensation Revenues	\$88,136
4	2011 ROR Carrier Base Period Revenue (Line 1 + Line 2 + Line 3)	\$1,302,121
5	ROR Carrier Baseline Adjustment Factor (0.95 * 0.95)	0.9025
6	ROR Carrier Revenue Requirement (Line 4 * Line 5)	\$1,175,164
7	Pool Administration Expenses	\$22,647
8	Total ROR Carrier Revenue Requirement (Line 6 + Line 7)	\$1,197,812
Revenues from Reformed Inter-carrier Compensation (ICC) Rates		
9	Interstate Switched Access Revenues	\$635,443
10	Interstate Allocated Switched Access Revenues#	\$343,365
11	Transitional Intrastate Access Service Revenues	\$240,297
12	Net Transitional Reciprocal Compensation Revenues	\$0
13	Total ICC Revenue (Line 10 + Line 11 + Line 12)	\$583,663
Eligible Recovery		
14	TRS Increment	\$587
15	Regulatory Fees Increment	\$0
16	NANPA Increment	\$0
17	Interstate Local Switching Support for Price Cap Affiliates	\$0
18	Eligible Recovery (Line 8 - Line 13) + (Line 14 + Line 15 + Line 16) - (Line 17)	\$614,736
Revenues from Access Recovery Charges (ARC)		
19	Residential ARC Revenues	\$48,598
20	Single Line Business ARC Revenues	\$4,188
21	Multi-Line Business ARC Revenues	\$22,488
22	Total ARC Revenues (Line 19 + Line 20 + Line 21)	\$75,274
Connect America Fund (CAF) ICC Support**		
23	Connect America Fund (CAF) ICC Support (Line 18 - Line 22)	\$539,462

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.

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				BEK Communications Cooperative	
Signature of authorized officer		<i>Brett Stroh</i>		Date	
Printed name of authorized officer		Brett Stroh		6/7/2013	
Title or position of authorized officer				President	
Telephone number of authorized officer:				7014752361 . ext.	
Study Area Code of Reporting Carrier		381604	Filing Due Date for this form (mm/dd/yyyy)	7/1/2013	
<input checked="" type="checkbox"/>	I certify that our company receives or is projected to receive High Cost Loop Support or High Cost Model Support in 2013 and has no monthly residential rates (plus charges as defined) less than \$14.				

Rate Floor Data

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING RATE FLOOR DATA ON THE CARRIER'S BEHALF:

<p>Certification of Officer to Authorize an Agent to File Rate Floor Data on Behalf of Reporting Carrier</p> <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>BEK Communications Cooperative</u>			
Signature of authorized officer <u>Brett Stroh</u>			Date <u>6/7/2013</u>
Printed name of authorized officer <u>Brett Stroh</u>			
Title or position of authorized officer <u>President</u>			
Telephone number of authorized officer: <u>7014752361</u> , ext.			
Study Area Code of Reporting Carrier	<u>381604</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>7/1/2013</u>



Local Rate Floor Data Collection

Logged in User: Patricia Hoyt



Study Area: BEK COMM. COOP. (ID: 381604)

[Study Area List](#)

Study Area - Exchange Level Data for Local Rate Floor

[Data Entry](#) [History](#)

- [Instructions](#)
- [Agent HC RF Cert Form](#)
- [Carrier HC RF Cert Form \(No Rates Less Than \\$14\)](#)
- [Carrier HC RF Cert Form \(With Rates Less Than \\$14\)](#)
- [Print Submitted Data in PDF format](#)
- [Print Submitted Data in Excel format](#)

Data Collection Period:

Name:
 [First Middle Last]
 Phone: [999-999-9999]
 Email:

Enter all exchange/rate zone level rates and their corresponding lines below, where the sum of columns C-F is less than \$14.
 This data will be used to calculate the impact of the local rate floor on your company's High Cost Support.

(A) Exchange Name/Zone Name	(B) Class Of Service	(C) Residential Local Service Charge	(D) State Subscriber Line Charge	(E) State Universal Service Fee	(F) Mandatory Extended Area Service Charge	(G) Rate Total Subject to Floor (Sum of C-F)	(H) Residential Lines excluding Lifelines
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

[To enter additional rows of data, click on the + button.]

If the data form is left blank, select one of the boxes below:

- Check here if your company receives or is projected to receive High Cost Loop Support or High Cost Model Support in 2013, but has no monthly residential rates (plus charges listed above) less than \$14 (**certification required**)
- Check here if your company is not projected to receive High Cost Loop Support or High Cost Model Support in 2013
- Check here if you plan to submit local rate floor data directly to USAC

[Study Area List](#)

[Submit Response](#)



2013 CAF ICC Data Collection Update

[NECA Home](#) [NECA Data Collections](#) [Contact Us](#) [General Instructions](#) [Logout](#)

Logged in User: Ryan Denzel



[Home](#) [Select Company](#) [Main Page](#) [Study Area Data Input Menu](#) ▶ [CAF & ARC Output](#) ▶ [Electronic Certifications](#) ▶

Study Area: BEK COMM. COOP. (ID: 381604)

Access Recovery Charge - Output

Recalculate ARC Rates & CAF Support revenues

Study Area ID	Exchange/Zone Name	Residential Lines excluding Lifelines	Residential ARC	Residential ARC Revenue	SLB ARC	SLB ARC Revenue	MLB ARC	MLB ARC Revenue	Total ARC Revenue
381604	Hazelton	253	1.00	3036.00					
381604	Kintyre	130	1.00	1560.00					
381604	Lehr	117	1.00	1404.00					
381604	Linton	566	1.00	6792.00					
381604	Mckenzie	234	0.51	1432.08					
381604	Napolean	371	1.00	4452.00					
381604	Pettibone	82	1.00	984.00					
381604	Regan	72	1.00	864.00					
381604	Robinson	62	1.00	744.00					
381604	Steele	361	1.00	4332.00					
381604	Sterling	177	0.51	1083.24					
381604	Strasburg	431	1.00	5172.00					
381604	Tappen	268	1.00	3216.00					
381604	Tuttle	114	1.00	1368.00					
381604	Wilton	430	0.51	2631.60					
381604	Wing	137	1.00	1644.00					
381604	Wishek	549	1.00	6588.00					
381604	Zeeland	108	1.00	1296.00					
381604	Study Area Summary	4462		48598.92	1.00	4188.00	2.00	22488.00	75274.92

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 Carrier Association, Inc. (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 data provided to the Authorized Agent; and, to the best of my knowledge, the actual data provided to the Authorized Agent are accurate.

Name of Authorized Agent National Exchange Carrier Association, Inc. (NECA)

Name of Reporting Carrier BEK Communications Cooperative

Signature of Authorized Officer Brett Stroh

Date May 24, 2013

Printed name of Authorized Officer Brett Stroh

Title or position of Authorized Officer President

Telephone number of Authorized Officer: (701) 475-2361, ext. _____

Study Area Code of Reporting Carrier 381604

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

6/17/2013

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					BEK Communications Cooperative					
Signature of authorized officer				<i>Brett Stroh</i>			Date		May 24, 2013	
Printed name of authorized officer					Brett Stroh					
Title or position of authorized officer					President					
Telephone number of authorized officer:					(701) 475-2361 ext.					
Study Area Code of Reporting Carrier			381604		Filing Due Date for this form (mm/dd/yyyy)		6/17/2013			
<p>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.</p>										

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				BEK Communications Cooperative	
Signature of authorized officer		<i>Brett Stroh</i>		Date	May 24, 2013
Printed name of authorized officer		Brett Stroh			
Title or position of authorized officer		President			
Telephone number of authorized officer: (701) 472-2361 ext.					
Study Area Code of Reporting Carrier		381604	Filing Due Date for this form (mm/dd/yyyy)	6/17/2013	
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				BEK Communications Cooperative			
Signature of Authorized Officer			<i>Brett Stroh</i>		Date	May 24 2013	
Printed name of Authorized Officer				Brett Stroh			
Title or position of Authorized Officer				President			
Telephone number of Authorized Officer:				(701) 475-2361, ext.			
Study Area Code of Reporting Carrier		381604		Filing Due Date for this form (mm/dd/yyyy)		6/17/2013	
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.							



2013 CAF ICC Data Collection Update

[NECA Home](#) [NECA Data Collections](#) [Contact Us](#) [General Instructions](#) [Logout](#)

Logged in User: Ryan Denzel



[Home](#) [Select Company](#) [Main Page](#) [Study Area Data Input Menu](#) ▶ [CAF & ARC Output](#) ▶ [Electronic Certifications](#) ▶

Study Area: BEK COMM. COOP. (ID: 381604)

Test Period 2013/2014

Study Area Lines for Test Period 2013/2014 - (July 1, 2013 - June 30, 2014)

Study Area ID	Test Year 2013-14 Residential Lines Excluding Life Lines	Test Year 2013-14 Single Line Business Lines	Test Year 2013-14 Multi-Line Business Lines
381604	4462	349	937

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

© 2013 NECA
[Terms of Use](#) | [Privacy Policy](#)