



Steve Monilaws – President
Ann Faught - Manager
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2894 146th Ave SE
Absaraka, ND 58002

December 3, 2014

Mr. Darrell Nitschke
Director of Administration/Executive Secretary
North Dakota Public Service Commission
State Capitol
600 East Boulevard, Dept. 408
Bismarck, ND 58505-0480



Re: Voice Rate Data Filed Pursuant to 47 C.F.R. §54.313 (h)(1)

Dear Mr. Nitschke:

The Federal Communications Commission's (FCC) November 18, 2011 USF/ICC Transformation Order, FCC 11-161 (WC Docket No. 10-90) requires carriers seeking recovery through the federal mechanisms established in the Order to make certain certifications to the Federal Communications Commission (FCC), the Universal Service Administrative Company (USAC), and relevant state commissions or Tribal governments, as appropriate. See C.F.R. §54.313 (h)(1). Absaraka Cooperative Telephone Company (Study Area Code: 381601) provides the following information.

Specifically, 47 C.F.R. §54.313 (h)(1) requires Eligible Telecommunications Carriers (ETC) who receive federal support are required to file additional voice rate data indicating the rates and lines that are below the federal urban rate floor, currently \$20.46. A copy of the Officer Certifications as to the Accuracy of the Data Reported for the Rate Floor Data, and naming the National Exchange Carrier Association (NECA) as agent for filing with the FCC and USAC.

Please contact me if further information is required.

Sincerely,

Ann Faught
General Manager
ffarm@wtc-mail.net
701-896-.3404
Enclosures

15 PU-14-406 Filed: 12/8/2014 Pages: 4
Copy of FCC 47 CFR Section 54.313(h) Local Rate
Floor Data & Collection

Absaraka Cooperative Telephone Company, Inc.
Ann Faught, General Manager

RATE FLOOR DATA COLLECTION - OMB Control Number 3060-0986

Block 1 - Contact Information

ROW #	DATA ELEMENT	FORMAT OF REQUESTED DATA	RESPONSE
1	Carrier Study Area Code	6 numeric digits	381601
2	Carrier Study Area Name	alpha characters	ABSARAKA COOP TELEPHONE CO.
3	Service Provider Identification Number	9 numeric digits	143002200
4	Residential Local Service Charge Effective Date	mm/dd/yy	12/01/14
5	Contact Name	alpha characters	Faught, Ann L
6	Contact Telephone Number (include area code)	9 numeric digits	701-896-3404
7	Sheet Number	numeric digit(s)	
8	Total Number of Sheets	numeric digit(s)	

Block 2- Residential Local Service Rates, Fees, and Line Counts

	Column 1 Residential Local Service Charge	Column 2 State Subscriber Line Charge	Column 3 State Universal Service Fee	Column 4 Mandatory Extended Area Service Charge	Column 5 Loops	Column 6 Exchange Name/ Zone Name	Column 7 Class Of Service
9	16.00	0.00	0.00	0.00	36	Absaraka	FR
10	16.00	0.00	0.00	0.00	1	Absaraka	Lifeline-FR

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 **Absaraka Cooperative Telephone Co., Inc.**

Signature of authorized officer *Ann L. Faught* Date **12/3/2014**

Printed name of authorized officer **Ann L. Faught**

Title or position of authorized officer **General manager**

Telephone number of authorized officer: **(701) 896-3404** ext.

Study Area Code of Reporting Carrier **381601** Filing Due Date for this form (mm/dd/yyyy) **01/02/2015**

Rate Floor Data

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 <u>National Exchange Carrier Association (NECA)</u>			
Name of Reporting Carrier <u>Absaraka Cooperative Telephone Co., Inc.</u>			
Signature of authorized officer <u>Ann L. Faught</u>			Date <u>12/3/14</u>
Printed name of authorized officer <u>Ann L. Faught</u>			
Title or position of authorized officer <u>General Manager</u>			
Telephone number of authorized officer: <u>(701) 896-3404</u> , ext.			
Study Area Code of Reporting Carrier	<u>381601</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>01/02/2015</u>