



**Jones and Kelly,
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June 20, 2017

North Dakota Public Service Commission
Attn: John Hamre
600 E. Boulevard, Dept. 408
Bismarck, ND 58505-0480



Via U.S. Mail

RE: CAF, ICC and ARC filings in accordance with Sections 54.304(d)(1) and 51.917(d)(vii) of the FCC Rules—**With Redacted Copy and with Trade Secret Stamps on appropriate documents.**

Dear Mr. Hamre,

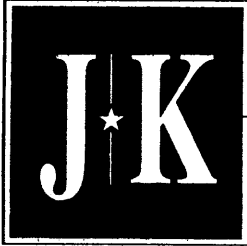
Thank you for talking to me today. As we discussed sent herewith is a Redacted Copy of the filings for the public and one Non-Redacted Copy of the filings that are marked “confidential – Further Disclosure Not Permitted” on the documents with trade secret information.

If there is anything else you would like me to submit or in a different format, please let me know.

Thank you again.

Sincerely,

Fallon Kelly
General Counsel
Dickey Rural Telephone Cooperative



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June 16, 2017

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

Via U.S. Mail and via e-mail to ndpsc@nd.gov

RE: CAF, ICC and ARC filings in accordance with Sections 54.304(d)(1) and 51.917(d)(vii) of the FCC Rules

Dear Mr. Nitschke,

Attached hereto are several documents being filed by Dickey Rural Telephone Cooperative (DRN) in accordance with Sections 54.304(d)(1) and 51.917(d)(vii) of the FCC Rules. The documents are being filed in hard copies and in electronic format. Due to the printed formatting of the data compilations it may be easier for you to review those documents in their electronic form. **DRN is also seeking trade secret protection in association with this filing.**

The Documents sent herewith include the following:

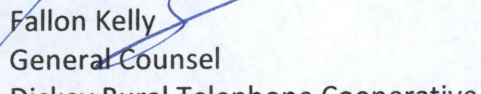
1. Application for Protective Order and Trade Secret Protection of Dickey Rural Telephone Cooperative;
2. Certification of Officer as to the Accuracy of the CAF ICC Data Reported;
3. Certification of Officer for Rate-of-Return Carrier Eligibility for CAF/ICC Recovery;
4. Certification of Officer for Rate-of-Return Carrier Not Seeking Duplicative Recovery;
5. Certification of Officer to Authorize an Agent to File Data Reported on Behalf of Reporting Carrier;
6. The Intrastate TRP report, which displays the proposed July 1, 2017 intrastate tariff at the rate element level;
7. The post true-up Access Recovery Charge Output report, which has the residential ARC revenue and lines at the exchange level, as well as the post true-up ARC rates and revenue for SLB and MLB;
8. The post true-up CAF ICC amount on the USAC report.
9. The Rate Floor Data Collection Report.

10. The Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data.
11. The Certification of Officer to Authorize an Agent to File Rate Floor Data.

The originals of these documents were filed with the FCC but the copies sent herewith are true and accurate copies of those that were filed with the FCC.

If you have any questions or concerns, please do not hesitate to contact me.

Sincerely,



Fallon Kelly
General Counsel
Dickey Rural Telephone Cooperative

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: **DICKEY RURAL COOP**

Digitally signed by Robert Johnson DN:cn=Robert Johnson,email=johnson@drtel.com,O=dickey rural coop,|=Ellendale ND 58436, Date:5/22/2017

Robert Johnson

Date: **5/22/2017**

Signature of Authorized Officer:

Printed name of Authorized Officer: **Robert Johnson**

Title or position of Authorized Officer: **CEO/General Manager**

Telephone number of Authorized Officer: **701-344-6010**

Study Area Code of Reporting Carrier

381611

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 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: **DICKEY RURAL COOP**

Robert Johnson
 Digitally signed by Robert Johnson DN:cn=Robert Johnson, email=johnson@drfnet.com, o=dickey rural coop, c=EJendisle ND 58436, Date:5/22/2017

Date: **5/22/2017**

Signature of Authorized Officer or employee:

Printed name of Authorized Officer or employee: **Robert Johnson**

Title or position of Authorized Officer or employee: **CEO/General Manager**

Telephone number of Authorized Officer or employee: **701-344-6010**

Study Area Code of Reporting Carrier	381611	Filing Due Date for this form (mm/dd/yyyy)	6/16/2017
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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 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: **DICKEY RURAL COOP**

Digitally signed by Robert Johnson DN: cn=Robert Johnson, email=johnson@drfel.com, o=dickey rural coop, j=Ellendale ND 58436, Date: 5/22/2017

Robert Johnson

Signature of Authorized Officer or employee:

Date: **5/22/2017**

Printed name of Authorized Officer or employee: **Robert Johnson**

Title or position of Authorized Officer or employee: **CEO/General Manager**

Telephone number of Authorized Officer or employee: **701-344-6010**

Study Area Code of Reporting Carrier: **381611**

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 Officer to Authorize an Agent to File Data Reported on Behalf of Reporting Carrier

I certify that (Name of Agent) National Exchange Carriers Association, Inc. 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.

Name of Authorized Agent: National Exchange Carriers Association, Inc.

Name of Reporting Carrier: DICKEY RURAL COOP

Robert Johnson

Digitally signed by Robert Johnson DN:cn=Robert Johnson, email=robertjohnson@drnel.com, o=Dickey Rural Coop, l=Ellendale ND 58436, Date: 5/22/2017

Signature of Authorized Officer: _____ Date: 5/22/2017

Printed name of Authorized Officer: Robert Johnson

Title or position of Authorized Officer: CEO/General Manager

Telephone number of authorized officer: 701-344-6010

Study Area Code of Reporting Carrier: 381611

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.



Local Rate Floor Data Collection

Logged in User: Patricia Hoyt



Study Area: **DICKEY RURAL COOP (ID: 381611)**

[Study Area List](#)

Study Area - Exchange Level Data for Local Rate Floor

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

Data Collection Period:

- [Instructions](#)
- [Agent Certification](#)
- [Data Certification \(No Rates Less Than \\$22.49\)](#)
- [Data Certification \(With Rates Less Than \\$22.49\)](#)
- [Print Submitted Data in PDF format](#)
- [Print Submitted Data in Excel format](#)

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 \$22.49.
 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	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="button" value="+"/>

[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 Frozen High Cost Support that is based on HCLS or High Cost Model Support) during the period July 2017 through June 2018, but has no monthly residential rates (plus charges listed above) less than \$22.49 (**certification required**)
- Check here if your company is not projected to receive High Cost Loop Support(or Frozen High Cost Support that is based on HCLS or High Cost Model Support) during the period July 2017 through June 2018.
- Check here if you plan to submit local rate floor data directly to USAC

Rate Floor Template

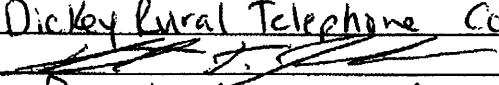
Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data

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 <i>Dickens Rural Telephone Cooperative</i>			
Signature of authorized officer <i>[Signature]</i>			Date <i>6/15/17</i>
Printed name of authorized officer <i>Robert K Johnson</i>			
Title or position of authorized officer <i>CEO / GM</i>			
Telephone number of authorized officer: <i>(701) 344-1206 ext.</i>			
Study Area Code of Reporting Carrier	<i>381611</i>	Filing Due Date for this form (mm/dd/yyyy)	<i>07/01/2017</i>
<input checked="" type="checkbox"/> I certify that our company receives or is projected to receive High Cost Loop Support (or Frozen High Cost Support that is based on HCLS or High Cost Model Support) during the period July 2017 through June 2018, but has no monthly residential rates (plus charges as defined) less than \$22.49.			

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>Dickey Rural Telephone Cooperative</u>			
Signature of authorized officer 			Date <u>6/5/17</u>
Printed name of authorized officer <u>Robert E. Johnson</u>			
Title or position of authorized officer <u>CEO/CM</u>			
Telephone number of authorized officer: <u>214-614-6100 ext.</u>			
Study Area Code of Reporting Carrier	<u>381611</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>07/01/2017</u>

CERTIFICATION-AGENT

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: DICKEY RURAL COOP			
Signature of Authorized Officer: Robert Johnson <small>Digitally signed by Robert Johnson DN:cn=Robert Johnson, email=johnson@drfai.com, o=dickey rural coop, c=Elmendale ND 58435, Date:5/22/2017</small>			
Printed name of Authorized Officer: Robert Johnson		Date: 5/22/2017	
Title or position of Authorized Officer: CEO/General Manager			
Telephone number of Authorized Officer: 701-344-6010			
Study Area Code of Reporting Carrier: 381611		Filing Due Date for this form (mm/dd/yyyy)	6/16/2017
<small>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.</small>			

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: DICKEY RURAL COOP

Signature of Authorized Officer or employee: Robert Johnson
Digitally signed by Robert Johnson DN:cn=Robert Johnson, email=robertjohnson@drfcd.com, o=dickey rural coop, |a=Elmendale ND 58438, Date:5/22/2017

Date: 5/22/2017

Printed name of Authorized Officer or employee: Robert Johnson

Title or position of Authorized Officer or employee: CEO/General Manager

Telephone number of Authorized Officer or employee: 701-344-6010

Study Area Code of Reporting Carrier	381611	Filing Due Date for this form (mm/dd/yyyy)	6/16/2017
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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 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: DICKEY RURAL COOP

Signature of Authorized Officer or employee: Robert Johnson
Digitally signed by Robert Johnson DN:cn=Robert Johnson, email=johnson@drfel.com, O=dickey rural coop, j=Ellendale ND 58436, Date:5/22/2017

Date: 5/22/2017

Printed name of Authorized Officer or employee: Robert Johnson

Title or position of Authorized Officer or employee: CEO/General Manager

Telephone number of Authorized Officer or employee: 701-344-6010

Study Area Code of Reporting Carrier	381611	Filing Due Date for this form (mm/dd/yyyy)	6/16/2017
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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.

REDACTED

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 Carriers Association, Inc. 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.

Name of Authorized Agent: National Exchange Carriers Association, Inc.

Name of Reporting Carrier: DICKEY RURAL COOP

Signature of Authorized Officer: Robert Johnson
Digitally signed by Robert Johnson DN:cn=Robert Johnson, email=robertjohnson@drcl.com, o=dickey rural coop, l=Ellendale ND 58436, Date:5/22/2017

Date: 5/22/2017

Printed name of Authorized Officer: Robert Johnson

Title or position of Authorized Officer: CEO/General Manager

Telephone number of authorized officer: 701-344-6010

Study Area Code of Reporting Carrier	<u>381611</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>6/16/2017</u>
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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.



2017 CAF ICC Data Collection

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

Home Select Company Main Page Study Area Data Input Menu > CAF & ARC Output > Historic Reports > E-Certification >

Study Area: DICKEY RURAL COOP (ID: 381611)

Intrastate Revenues (FCC TRP exhibit)

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

REDACTED

Intrastate Revenues

Test Year 2017-2018 Expected Maximum Intrastate Revenue: \$0.00

Col D --	Col E --	Col F --	Col G --	Col H --	Col I --	Col J -- H*I	Col K --	Col L --	Col M -- [(L/K)^(12/21)-1]*100	Col N -- H*L
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	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	Intrastate Units Growth Rate %	TY 2017-18 Forecasted Intrastate Revenue
Terminating End Office Access Service	MOU	\$	\$	\$		\$	0.00	0.00	0.00%	\$0.00
Terminating End Office, Premium, per access minute										
Terminating End Office Access Service	MOU	\$	\$	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Terminating End Office, Non-Premium, per access minute										
Entrance Facility, Per Termination Voice Grade Two Wire	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Entrance Facility, Per Termination Voice Grade Four Wire	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Entrance Facility, Per Termination High Capacity DS1	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Entrance Facility, Per Termination High Capacity DS3	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Entrance Facility, Per Termination Synchronous Optical Channel OC3	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Entrance Facility, Per Termination Synchronous Optical Channel OC12	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Entrance Facility, Per Termination ESALT 2 Mbps	Circuit	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Entrance Facility, Per Termination ESALT 10 Mbps	Circuit	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Entrance Facility, Per Termination ESALT 50 Mbps	Circuit	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile Voice Grade - Two Wire & Four Wire	Mile	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00

		\$	\$	\$	\$	0.00	0.00	0.00%	\$0.00	
Direct Trunked Transport Facility/ Mile High Capacity DS1	Mile									
Direct Trunked Transport Facility/ Mile High Capacity DS3	Mile	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile Synchronous Optical Channel OC3	Mile	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile Synchronous Optical Channel OC12	Mile	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile ESALT 2 Mbps DTF-E1	Circuit Miles	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile ESALT 2 Mbps DTF-E2	Circuit Miles	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile ESALT 2 Mbps DTF-E3	Circuit Miles	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile ESALT 2 Mbps DTF-E4	Circuit Miles	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile ESALT 10 Mbps DTF-E1	Circuit Miles	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile ESALT 10 Mbps DTF-E2	Circuit Miles	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile ESALT 10 Mbps DTF-E3	Circuit Miles	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile ESALT 10 Mbps DTF-E4	Circuit Miles	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile ESALT 50 Mbps DTF-E1	Circuit Miles	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile ESALT 50 Mbps DTF-E2	Circuit Miles	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile ESALT 50 Mbps DTF-E3	Circuit Miles	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/ Mile ESALT 50 Mbps DTF-E4	Circuit Miles	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/Termination Voice Grade - Two Wire & Four Wire	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/Termination High Capacity DS1	Termination	\$	\$	\$	\$	0.00	0.00	0.00%	\$0.00	
Direct Trunked Transport Facility/Termination High Capacity DS3	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00

REDACTED

CONFIDENTIAL - FURTHER DISCLOSURE NOT PERMITTED

Facility/Termination Synchronous Optical Channel OC3										
Direct Trunked Transport Facility/Termination Synchronous Optical Channel OC12	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/Termination ESALT 2 Mbps	Circuit terms	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/Termination ESALT 10 Mbps	Circuit terms	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Direct Trunked Transport Facility/Termination ESALT 50 Mbps	Circuit terms	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Multiplexing, Per Arrangement DS3 to DS1	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Multiplexing, Per Arrangement DS1 to Voice	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Customer Node Per Node OC3 155.52 Mbps	Port	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Customer Node Per Node OC12 622.08 Mbps	Port	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Customer Premises Port, Per Port OC3 155.52 Mbps	Port	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Customer Premises Port, Per Port STS-1 51.84 Mbps	Port	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Customer Premises Port, Per Port DS3 44.736 Mbps	Port	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Customer Premises Port, Per Port DS1 1.544 Mbps	Port	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Add/Drop Multiplexing Central Office Port, Per Port DS1 1.544 Mbps	Port	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Add/Drop Multiplexing Central Office Port, Per Port OC3 155.52 Mbps	Port	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Add/Drop Multiplexing Central Office Port, Per Port DS3 44.736 Mbps	Port	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Network Blocking, Per Blocked Call Network Blocking, Per Blocked Call, Applies to FGD only	Call	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
ESALT Real Time CoS/QoS, Per ESALT DTF-E1 Facility ESALT 2 Mbps	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
ESALT Real Time CoS/QoS, Per ESALT DTF-E1 Facility ESALT 10 Mbps	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
ESALT Real Time CoS/QoS, Per ESALT DTF-E1 Facility ESALT 50 Mbps	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
ESALT Entrance Facility Protection,	Circuit	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00

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Per ESALT Entrance Facility ESALT 2 Mbps										
ESALT Entrance Facility Protection, Per ESALT Entrance Facility ESALT 10 Mbps	Circuit	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
ESALT Entrance Facility Protection, Per ESALT Entrance Facility ESALT 50 Mbps	Circuit	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Common Channel Signaling Network Connection Signaling Mileage Facility, Per Mile	Mile	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Common Channel Signaling Network Connection Signaling Mileage Termination, Per Termination	Termination	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Common Channel Signaling Network Connection Signaling Entrance Facility, Per Facility	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Common Channel Signaling Network Connection STP Port, Per Port	Port	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Terminating Tandem Switched Transport Terminating Tandem Switched Transport Facility	Minutes / Mile	\$	\$	\$	\$		0.00	0.00	0.00%	\$0.00
Terminating Tandem Switched Transport Terminating Tandem Switched Termination	Minutes	\$	\$	\$	\$		0.00	0.00	0.00%	\$0.00
Terminating Tandem Switched Transport Terminating Tandem Switching	Minutes	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges Voice Grade Two Wire	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges Voice Grade Four Wire	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges High Capacity DS1	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges High Capacity DS3	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges Synchronous Optical Channel OC3	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges Synchronous Optical Channel OC12	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges Interim NXX Translation, Per Order	Order	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges FGD and FGD Conversion of Multifrequency Address Signaling to SS7 Signaling or	Order	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00

SS7 Signaling to Multifrequency Address Signaling, per 24 trunks converted or fraction thereof on a per order basis										
Nonrecurring Charges Trunk Activation, per 24 trunks activated or fraction thereof on a per order basis	Order	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges Flexible Automatic Number Identification (Flex ANI), per End Office, per CIC	End Office	\$0.00000000	\$0.00000000	\$0.00000000	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges ESALT 2 Mbps	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges ESALT 10 Mbps	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges ESALT 50 Mbps	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges ESALT Direct Trunked Termination, per ESALT Direct Trunked Termination installed	Order	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
Nonrecurring Charges ESALT Entrance Facility Protection, per ESALT Entrance Facility	Facility	\$	\$0.00000000	\$	0.00	\$0.00	0.00	0.00	0.00%	\$0.00
					\$					\$0.00

REDACTED

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2017 CAF ICC Data Collection

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Logged in User: Patricia Hoyt

Home Select Company Main Page Study Area Data Input Menu > CAF & ARC Output > Historic Reports > E-Certification >

Study Area: DICKEY RURAL COOP (ID: 381611)

Access Recovery Charges

Recalculate ARC Rates & CAF Support revenues

REDACTED

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

Test Period 2017-2018 Post True-Up (Filing) View

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 ARC Revenue
Ashley	388	\$0.00	\$0.00							
Crete	35	\$0.00	\$0.00							
Dickey	100	\$0.00	\$0.00							
Edgeley	365	\$0.00	\$0.00							
Ellendale	600	\$0.00	\$0.00							
Forbes	109	\$0.00	\$0.00							
Forman	622	\$0.00	\$0.00							
Fort Ransom	107	\$0.00	\$0.00							
Fredonia	86	\$0.00	\$0.00							
Fullerton	95	\$0.00	\$0.00							
Guelph	116	\$0.00	\$0.00							
Gwinner	412	\$0.00	\$0.00							
Jud	131	\$0.00	\$0.00							
Kathryn	62	\$0.00	\$0.00							
Kulm	244	\$0.00	\$0.00							
LaMoure	535	\$0.00	\$0.00							
Lisbon	1119	\$0.00	\$0.00							
Litchville	180	\$0.00	\$0.00							
Marion	153	\$0.00	\$0.00							
Merricourt	30	\$0.00	\$0.00							
Milnor	430	\$0.00	\$0.00							
Nelvik	51	\$0.00	\$0.00							
Oakes	823	\$0.00	\$0.00							
Venturia	58	\$0.00	\$0.00							
Verona	94	\$0.00	\$0.00							
Study Area Summary	6945		\$0.00	588	\$	\$	1951	\$	\$	\$

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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: DICKEY RURAL COOP (ID: 381611)

Study Area USAC Reports

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[View Printer-friendly report]

2017 USAC Data Report (Test Period 2017-2018)

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	\$
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 Inter-carrier 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.



Local Rate Floor Data Collection

Logged in User: Patricia Hoyt

Study Area: DICKEY RURAL COOP (ID: 381611)

[Study Area List](#)

Study Area - Exchange Level Data for Local Rate Floor

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

[Instructions](#)

[Agent Certification](#)

[Data Certification \(No Rates Less Than \\$22.49\)](#)
[Data Certification \(With Rates Less Than \\$22.49\)](#)

[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 \$22.49.
 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
							+

[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 Frozen High Cost Support that is based on HCLS or High Cost Model Support) during the period July 2017 through June 2018, but has no monthly residential rates (plus charges listed above) less than \$22.49 (*certification required*)
- Check here if your company is not projected to receive High Cost Loop Support (or Frozen High Cost Support that is based on HCLS or High Cost Model Support) during the period July 2017 through June 2018.
- Check here if you plan to submit local rate floor data directly to USAC

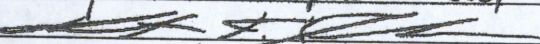
[Study Area List](#) [Submit Response](#) [Exit](#)

REDACTED

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				Dickens Rural Telephone Cooperative			
Signature of authorized officer					Date	6/5/17	
Printed name of authorized officer				Robert K Johnson			
Title or position of authorized officer				CEO / GM			
Telephone number of authorized officer:				701.344.1286 ext.			
Study Area Code of Reporting Carrier		381611	Filing Due Date for this form (mm/dd/yyyy)	07/01/2017			
<input checked="" type="checkbox"/>	I certify that our company receives or is projected to receive High Cost Loop Support (or Frozen High Cost Support that is based on HCLS or High Cost Model Support) during the period July 2017 through June 2018, but has no monthly residential rates (plus charges as defined) less than \$22.49.						

REDACTED

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 <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.			
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>Dickey Rural Telephone Cooperative</u>			
Signature of authorized officer <u>[Signature]</u>			Date <u>6/5/17</u>
Printed name of authorized officer <u>Robert E. Johnson</u>			
Title or position of authorized officer <u>CEO/CM</u>			
Telephone number of authorized officer: <u>20344-6610 ext.</u>			
Study Area Code of Reporting Carrier	<u>381611</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>07/01/2017</u>