

June 16, 2014

South Dakota Public Utilities Commission
500 East Capitol Avenue
Pierre, SD 57501-5070

RE: FCC - WC Docket No. 10-90
FCC ETC Reporting Requirements - 47 C.F.R. Section 54.313 (h)

In accordance with 47 C.F.R. Section 54.313(h), annual ETC reporting requirements for high-cost recipients, Santel Communications Cooperative, Inc. hereby submits Local Rate Floor information and certifications.

If you have any questions or comments, please do not hesitate to contact me at (605) 796-4411 or rthompson@santel.coop.

Sincerely,



Ryan Thompson
CEO/GM

Attachment





Local Rate Floor Data Collection

Logged in User: Ryan Thompson



Study Area: SANTEL COMM. COOP. (ID: 391676)

[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 \(No Rates Less Than \\$20.46\)](#)

[Carrier HC RF Cert Form \(With Rates Less Than \\$20.46\)](#)

[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 \$20.46.
 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	
Alpena	Monthly resider	16.50	0.00	0.00	0.00	16.50	151	
Alpena	Monthly Lifeline	16.50	0.00	0.00	0.00	16.50	5	
Artesian	Monthly resider	16.50	0.00	0.00	0.00	16.50	166	
Artesian	Monthly Lifeline	16.50	0.00	0.00	0.00	16.50	5	
Ethan	Monthly Lifeline	16.50	0.00	0.00	0.00	16.50	11	
Ethan	Monthly resider	16.50	0.00	0.00	0.00	16.50	283	
Forestburg	Monthly resider	16.50	0.00	0.00	0.00	16.50	94	
Forestburg	Monthly Lifeline	16.50	0.00	0.00	0.00	16.50	1	
Letcher	Monthly Lifeline	16.50	0.00	0.00	0.00	16.50	4	
Letcher	Monthly resider	16.50	0.00	0.00	0.00	16.50	230	

Mt Vernon	Monthly resider	16.50	0.00	0.00	0.00	16.50	290	
Mt Vernon	Monthly Lifeline	16.50	0.00	0.00	0.00	16.50	12	
Parkston	Monthly Lifeline	16.50	0.00	0.00	0.00	16.50	30	
Parkston	Monthly resider	16.50	0.00	0.00	0.00	16.50	939	
Tripp	Monthly resider	16.50	0.00	0.00	0.00	16.50	322	
Tripp	Monthly Lifeline	16.50	0.00	0.00	0.00	16.50	30	
Wolsey	Monthly Lifeline	16.50	0.00	0.00	2.00	18.50	8	
Wolsey	Monthly resider	16.50	0.00	0.00	2.00	18.50	226	
Woonsocket	Monthly resider	16.50	0.00	0.00	0.00	16.50	391	
Woonsocket	Monthly Lifeline	16.50	0.00	0.00	0.00	16.50	38	

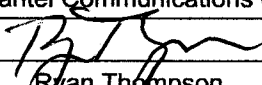
[To enter additional rows of data, click on the + button.]

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 2014, but has no monthly residential rates (plus charges listed above) less than \$20.46 (**certification required**)
- Check here if your company is not projected to receive High Cost Loop Support or High Cost Model Support in 2014
- Check here if you plan to submit local rate floor data directly to USAC

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>Santel Communications Cooperative, Inc.</u>				
Signature of authorized officer 				Date <u>June 16, 2014</u>
Printed name of authorized officer <u>Ryan Thompson</u>				
Title or position of authorized officer <u>CEO</u>				
Telephone number of authorized officer: <u>(605) 796-4411</u> ext.				
Study Area Code of Reporting Carrier	<u>391676</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>07/01/2014</u>

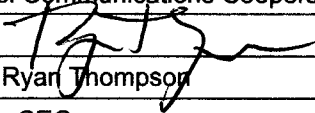
Rate Floor Template

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 **Santel Communications Cooperative, Inc.**

Signature of authorized officer



Date **6/16/2014**

Printed name of authorized officer

Ryan Thompson

Title or position of authorized officer

CEO

Telephone number of authorized officer: **(605) 796-4411**, ext.

Study Area Code of Reporting Carrier

391676

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

07/01/2014