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June 15, 2018

Ms. Patricia Van Gerpen  
Executive Director  
Public Utilities Commission  
500 East Capitol Avenue  
Pierre SD 57501-5070

Dear Ms. Van Gerpen:

The attached non-docketed information is being submitted by West River Telecommunications Cooperative pursuant to F.C.C. Section 54.313.

Please note that the information provided is confidential information and is so marked.

Please contact me if you have any further questions.

Sincerely,

A handwritten signature in blue ink that reads 'Beverly Huber'. The signature is fluid and cursive, written over the printed name.

Beverly Huber  
Accounting Manager

lal

Enclosures

\*The McLaughlin South Dakota exchange is included with the study area located in North Dakota and it's information is included in the required filings at the ND PSC.

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Offices: Hazen & Beulah, ND • Mobridge, SD

**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.

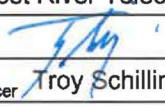
I certify that I am authorized to submit the information reported on this form on behalf of the reporting carrier; that I have provided the information reported herein based on data provided by the reporting carrier; and to the best of my knowledge the information reported herein is accurate.

Name of Authorized Agent <u>National Exchange Carrier Association (NECA)</u>			
Name of Reporting Carrier <u>West River Telecommunications Cooperative Mobridge</u>			
Signature of authorized officer 			Date <u>06/08/2018</u>
Printed name of authorized officer <u>Troy Schilling</u>			
Title or position of authorized officer <u>CEO/GM</u>			
Telephone number of authorized officer: <u>(701) 748-2211</u> , ext. _____			
Study Area Code of Reporting Carrier	<u>391671</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>07/01/2018</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				West River Telecommunications Cooperative Moberidge	
Signature of authorized officer					
Date			06/08/2018		
Printed name of authorized officer				Troy Schilling	
Title or position of authorized officer				CEO/GM	
Telephone number of authorized officer:				(701) 748-2211, ext.	
Study Area Code of Reporting Carrier		391671	Filing Due Date for this form (mm/dd/yyyy)	07/01/2018	