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Via Electronic Filing

June 29, 2018

Ms. Patricia Van Gerpen South Dakota Public Utilities Commission State Capitol 500 East Capitol Avenue Pierre, SD 57501-5070

Re:

In the Matter of the a Compliance filing for Red River Rural Telephone Association d/b/a Red River Communications for Certification Regarding Its Local Rate Floor Certification Pursuant to 47 C.F.R. 54.313(h)(1)

Docket No.:

Dear Ms. Van Gerpen:

Enclosed by e-filing please find the Request Compliance filing by Red River Rural Telephone Association d/b/a Red River Communications (the "Company").

The Company requests confidential treatment of Exhibits A which is submitted as a separate Confidential document pursuant to the requirements of ARSD § 20:10:01:41. This Exhibit contains financial information with independent economic value which is not generally known to, and not readily ascertainable to, competitors of the Company which could obtain economic value from disclosure. The Company maintains the information as secret. The Company requests that such information be maintained as confidential by the South Dakota Public Utilities Commission in perpetuity.

Very truly yours,

Tom Campbell
Telecommunications Consultant

Enclosures cc: Jeff Olson

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RATE FLOOR DATA COLLECTION - OMB Control Number 3060-0986

Block 1 - 0	Contact	Information
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ROW#	DATA ELEMENT	FORMAT OF REQUESTED DATA	RESPONSE
1	Carrier Study Area Code	6 numeric digits	381631
2	Carrier Study Area Name	alpha characters	RED RIVER RURAL TEL. ASSN. DBA RED RIVER COM
3	Service Provider Identification Number	9 numeric digits	143002213
4	Residential Local Service Charge Effective Date	mm/dd/yy	06/01/18
5	Contact Name	alpha characters	Olson, Jeffrey J
6	Contact Telephone Number (include area code)	9 numeric digits	701-553-8309
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 Manditory Extended Area Service Charge	Column 5 Loops	Column 6 Exchange Name/ Zone Name	Column 7 Class Of Service
9						Abercrombie	FR
10						Abercrombie	Lifeline-FR
11						Barnesville	FR
12						Barnesville	Lifeline-FR
13						Colfax	FR
14						Colfax	Lifeline-FR
15						East Fairmount	FR
16						East Fairmount	Lifeline-FR
17						Fairmount	FR
18						Fairmount	Lifeline-FR
19						Great Bend	FR
20						Hankinson	FR
21						Hankinson	Lifeline-FR
22						Kent	FR
23						Kent	Lifeline_FR
24						Lidgerwood	FR
25						Lidgerwood	Lifeline_FR

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

26	Mo	poreton	FR
27	Ma	ooreton	Lifeline-FR
28	Ro	ollag	FR
29	Ro	ollag	Lifeline-FR
30	wy	yndmere	FR
31	wy	yndmere	Lifeline-FR

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.

Signature of authorized officer				Date June 4, 2018
Printed name of authorized officer	rey . Olson			
Title or position of authorized officer Ge	eneral Manager/CE	:O		
Telephone number of authorized officer:	(701), 553-8309, ext.			
Study Area Code of Reporting Carrier	381631	Filing Due Date for this form (mm/dd/yyyy)	07/01/2018	PROFESSION NAMED IN

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

Certification of On	ficer to Authorize an	Agent to File Rate Floor Data of	on Behalf of Re	porting Carrier
I certify that I am authorized	to submit the informatio	NECA) arrier. I also certify that I am an offi arrier. I also certify that I am an offi r data provided to the authorized ag nt is accurate. on reported on this form on behalf of ded by the reporting carrier; and to	f the reporting ca	rrier: that I have provided
	Exchange Carrier Associ	iation (NECA) dba Red River Communica	tions	
Name of Reporting Carnel				Date June 4, 2018
Signature of authorized officer	tey √. φ son			Date June 4, 2018
Signature of authorized officer	rey √. Øson eneral Manager/CE	:O		Date June 4, 2018
Signature of authorized officer Printed name of authorized officer Title or position of authorized officer Ge	, 00	:O		Date June 4, 2018