

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: KALAMA TEL CO

Signature of Authorized Officer: *Digitally signed by Rick Vitzthum DN:cn=Rick Vitzthum,email=rick@scattercreek.net,O=KALAMA TEL CO,l=,Date:05/27/2020*

Date: 05/27/2020

Printed name of Authorized Officer: Rick Vitzthum

Title or position of Authorized Officer: Chief Financial Officer

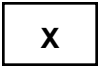
Telephone number of Authorized Officer: 360-264-3155

Study Area Code of Reporting Carrier

522426

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

07/01/2020



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 2020 through June 2021, but has no monthly residential rates (plus charges as defined) less than \$18.00.



Study Area - Exchange Level Data for Local Rate Floor

Study Area List



Data Entry

Electronic Certifications

History

Study Area : KALAMA TEL CO (ID : 522426)

Data Collection Period : 202006

QUICK LINKS

Name : Rick Middle Name Vitzhum [First Middle Last]

Phone Number : 360-264-2915 [999-999-9999]

Email : rick@scattercreek.net

Enter all exchange/rate zone level rates and their corresponding lines below, where the sum of columns C-F is less than \$18.00. This data will be used to calculate the impact of the local rate floor on your company's High Cost Support.

(A) Exchange /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"/>

[+ Add](#)

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 2020 through June 2021, but has no monthly residential rates (plus charges listed above) less than \$18.00 (**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 2020 through June 2021.
- Check here if you plan to submit local rate floor data directly to USAC

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	522426
2	Carrier Study Area Name	alpha characters	KALAMA TELEPHONE COMPANY
3	Service Provider Identification Number	9 numeric digits	143002598
4	Residential Local Service Charge Effective Date	mm/dd/yy	06/01/20
5	Contact Name	alpha characters	Vitzthum, Rick
6	Contact Telephone Number (include area code)	9 numeric digits	360-264-2915
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							