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June 16, 2017

State of Utah Public Service Commission

160 East 300 South

Salt Lake City, UT 84114

RE: Docket No. 17-999-14: Administration of Connect America Fund Intercarrier Compensation Replacement §54.304(d)(1), Annual Reporting Requirements §54.313(h)(i), Transition of Carrier Access Charges §51.909 , and Eligible Revenue Recovery § 57.917(d)(vii)

Moss Adams LLP respectfully files on behalf of All West Communications-Utah with the State of Utah Public Service Commission this Request for Confidential Treatment of Information (the "Request"). The Request seeks confidential treatment of information contained in the projected eligibility for CAF ICC funding for July 1, 2017 through June 30, 2018 and Local Rate Floor Data. This data collection is proprietary and confidential and subject to PSC R746-1-602 and 603.

Pursuant to 47 C.F.R. §54.304(d)(1) of the Federal Communications Commission's rules, enclosed please find the projected eligibility for CAF ICC funding for July 1, 2017 through

**MOSS ADAMS** LLP

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June 30, 2018 for All West Communications-Utah, Study Area Code 502288. This projection includes any true-ups associated with earlier filing periods. This projection has also been filed with the Federal Communications Commission and the Universal Service Administrative Company, as the administrator of the Federal Universal Service Fund.

In addition All West Communications-Utah includes its Local Rate Floor Data certifications and associated reporting as required in 47 C.F.R. §54.313 (h)(i). As previously filed in accordance with 47 C.F.R. §51.909 governing Carrier Access Charges; All West Communications-Utah provides supplemental TRP data. Lastly copies of annual certifications regarding CAF ICC Data reported to the Federal Communications Commission specifically required for Double Recovery as specified in 47 C.F.R. §57.917 (d)(vii) are included with this filing.

Enclosed is the original printed on yellow-colored paper stamped "CONFIDENTIAL - - SUBJECT TO UTAH PUBLIC SERVICE COMMISSION RULES R746-1-602 and 603," which has been placed in a sealed envelope. This information, submitted in a sealed envelope, stamped confidential can be reviewed by the Commission staff.

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Should you have any questions regarding this filing, please contact me at 509.777.0137 or

[tym.rutkowski@mossadams.com](mailto:tym.rutkowski@mossadams.com).

Sincerely,

A handwritten signature in blue ink, appearing to read "Tym Rutkowski".

Tym Rutkowski, Regulatory Consulting Manager for

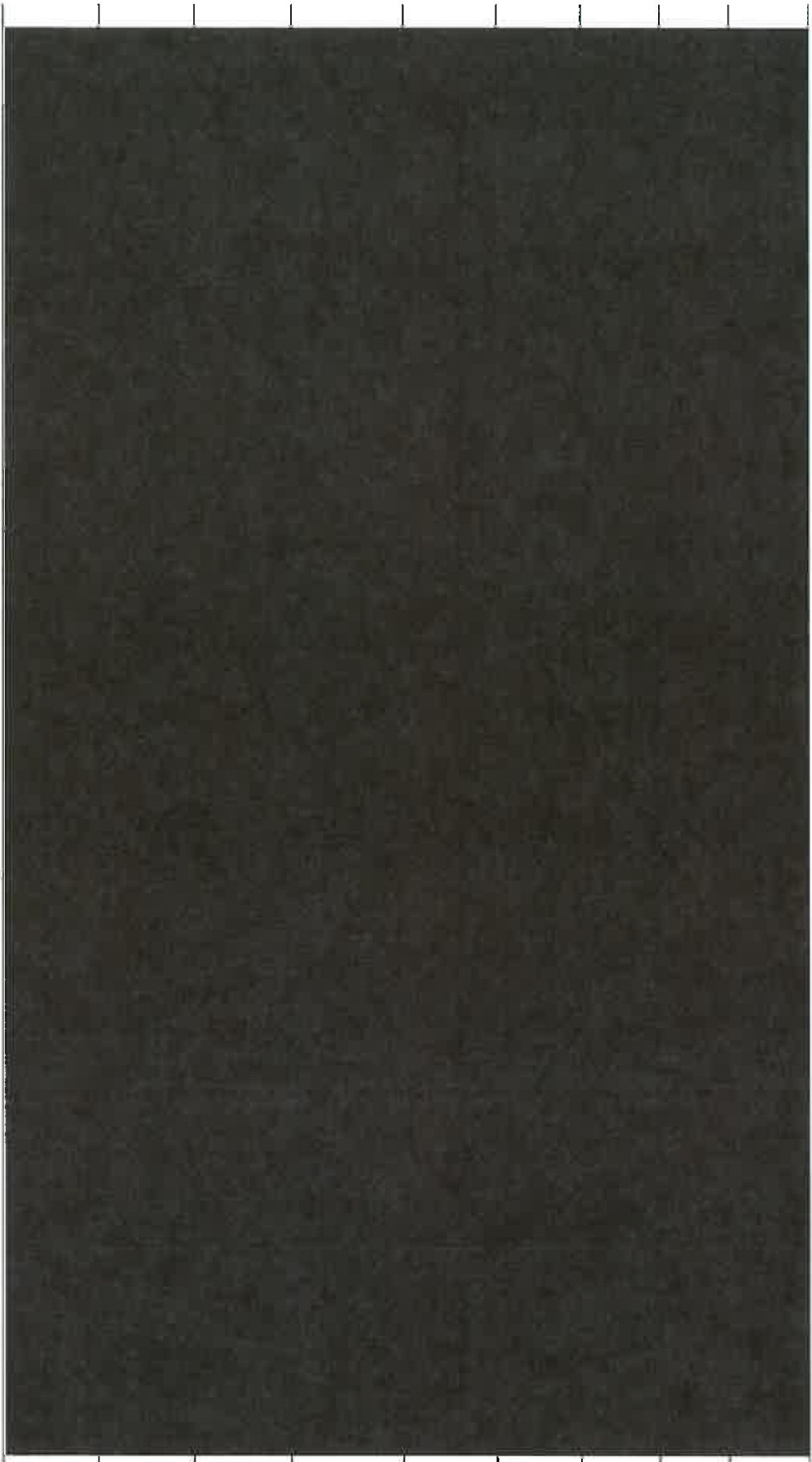
Moss Adams LLP

Enclosures

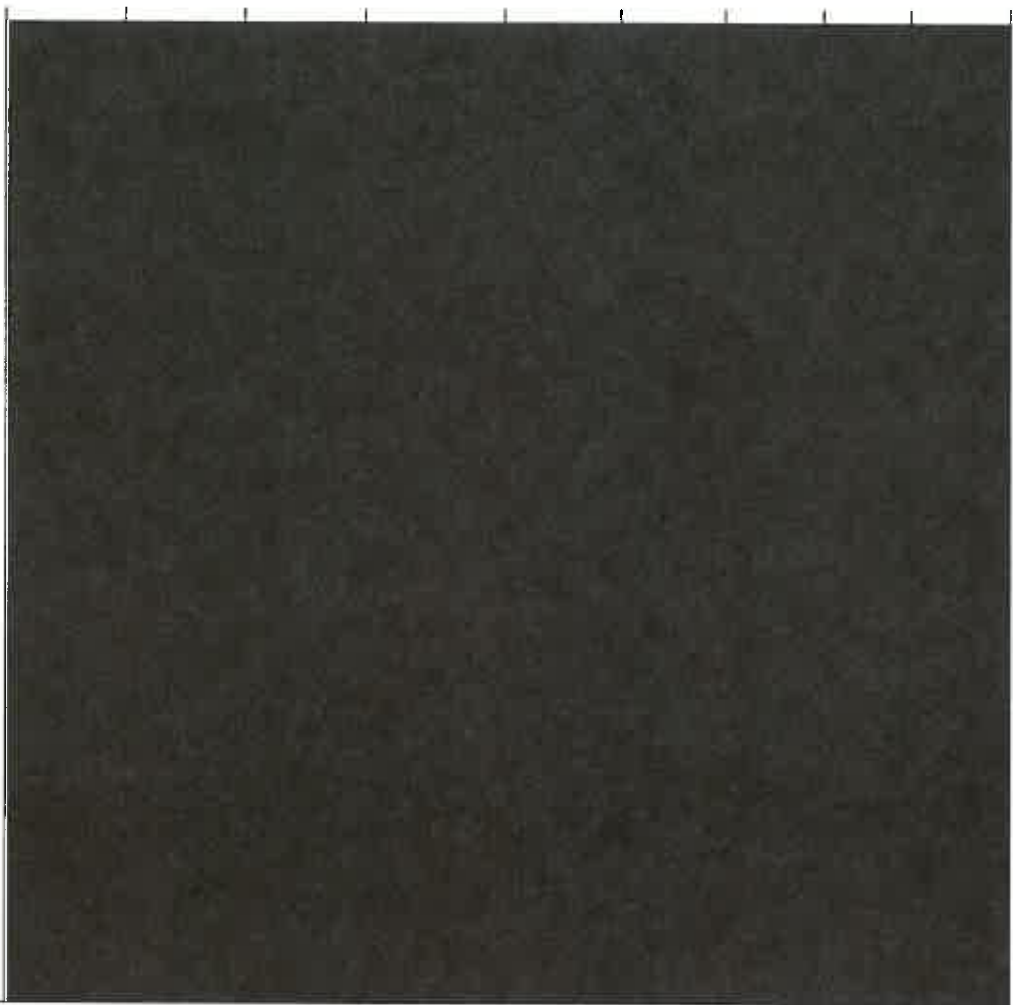


Direct Trunked Transport Facility/ Mile Synchronous Optical Channel OC12	Mile
Direct Trunked Transport Facility/ Mile ESALT 2 Mbps DTF-E1	Circuit Miles
Direct Trunked Transport Facility/ Mile ESALT 2 Mbps DTF-E2	Circuit Miles
Direct Trunked Transport Facility/ Mile ESALT 2 Mbps DTF-E3	Circuit Miles
Direct Trunked Transport Facility/ Mile ESALT 2 Mbps DTF-E4	Circuit Miles
Direct Trunked Transport Facility/ Mile ESALT 10 Mbps DTF-E1	Circuit Miles
Direct Trunked Transport Facility/ Mile ESALT 10 Mbps DTF-E2	Circuit Miles
Direct Trunked Transport Facility/ Mile ESALT 10 Mbps DTF-E3	Circuit Miles
Direct Trunked Transport Facility/ Mile ESALT 10 Mbps DTF-E4	Circuit Miles
Direct Trunked Transport Facility/ Mile ESALT 50 Mbps DTF-E1	Circuit Miles
Direct Trunked Transport Facility/ Mile ESALT 50 Mbps DTF-E2	Circuit Miles
Direct Trunked Transport Facility/ Mile ESALT 50 Mbps DTF-E3	Circuit Miles
Direct Trunked Transport Facility/ Mile ESALT 50 Mbps DTF-E4	Circuit Miles
Direct Trunked Transport Facility/Termination Voice Grade - Two Wire & Four Wire	Termination
Direct Trunked Transport Facility/Termination High Capacity DS1	Termination
Direct Trunked Transport Facility/Termination High Capacity DS3	Termination
Direct Trunked Transport Facility/Termination Synchronous Optical Channel OC3	Termination
Direct Trunked Transport Facility/Termination Synchronous Optical Channel OC12	Termination
Direct Trunked Transport Facility/Termination ESALT 2 Mbps	Circuit terms
Direct Trunked Transport Facility/Termination ESALT 10 Mbps	Circuit terms
Direct Trunked Transport Facility/Termination ESALT 50 Mbps	Circuit terms
Multiplexing, Per Arrangement DS3 to DS1	Termination
Multiplexing, Per Arrangement DS1 to Voice	Termination
Customer Node Per Node OC3 155.52 Mbps	Port
Customer Node Per Node OC12 622.08 Mbps	Port
Customer Premises Port, Per Port OC3 155.52 Mbps	Port
Customer Premises Port, Per Port STS-1 51.84	Port

Mbps	
Customer Premises Port, Per Port DS3 44.736 Mbps	Port
Customer Premises Port, Per Port DS1 1.544 Mbps	Port
Add/Drop Multiplexing Central Office Port, Per Port DS1 1.544 Mbps	Port
Add/Drop Multiplexing Central Office Port, Per Port OC3 155.52 Mbps	Port
Add/Drop Multiplexing Central Office Port, Per Port DS3 44.736 Mbps	Port
Network Blocking, Per Blocked Call Network Blocking, Per Blocked Call, Applies to FGD only	Call
ESALT Real Time CoS/QoS, Per ESALT DTF-E1 Facility ESALT 2 Mbps	Facility
ESALT Real Time CoS/QoS, Per ESALT DTF-E1 Facility ESALT 10 Mbps	Facility
ESALT Real Time CoS/QoS, Per ESALT DTF-E1 Facility ESALT 50 Mbps	Facility
ESALT Entrance Facility Protection, Per ESALT Entrance Facility ESALT 2 Mbps	Circuit
ESALT Entrance Facility Protection, Per ESALT Entrance Facility ESALT 10 Mbps	Circuit
ESALT Entrance Facility Protection, Per ESALT Entrance Facility ESALT 50 Mbps	Circuit
Common Channel Signaling Network Connection Signaling Mileage Facility, Per Mile	Mile
Common Channel Signaling Network Connection Signaling Mileage Termination, Per Termination	Termination
Common Channel Signaling Network Connection Signaling Entrance Facility, Per Facility	Facility
Common Channel Signaling Network Connection STP Port, Per Port	Port
Terminating Tandem Switched Transport Terminating Tandem Switched Transport Facility	Minutes / Mile
Terminating Tandem Switched Transport Terminating Tandem Switched Termination	Minutes
Terminating Tandem Switched Transport Terminating Tandem Switching	Minutes
Nonrecurring Charges Voice Grade Two Wire	Facility
Nonrecurring Charges Voice Grade Four Wire	Facility
Nonrecurring Charges High Capacity DS1	Facility
Nonrecurring Charges High Capacity DS3	Facility



Nonrecurring Charges Synchronous Optical Channel OC3	Facility
Nonrecurring Charges Synchronous Optical Channel OC12	Facility
Nonrecurring Charges Interim NXX Translation, Per Order	Order
Nonrecurring Charges FGC and FGD Conversion of Multifrequency Address Signaling to SS7 Signaling or SS7 Signaling to Multifrequency Address Signaling, per 24 trunks converted or fraction thereof on a per order basis	Order
Nonrecurring Charges Trunk Activation, per 24 trunks activated or fraction thereof on a per order basis	Order
Nonrecurring Charges Flexible Automatic Number Identification (Flex ANI), per End Office, per CIC	End Office
Nonrecurring Charges ESALT 2 Mbps	Facility
Nonrecurring Charges ESALT 10 Mbps	Facility
Nonrecurring Charges ESALT 50 Mbps	Facility
Nonrecurring Charges ESALT Direct Trunked Termination, per ESALT Direct Trunked Termination Installed	Order
Nonrecurring Charges ESALT Entrance Facility Protection, per ESALT Entrance Facility	Facility





# 2017 CAF ICC Data Collection

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

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

Study Area: ALL WEST COMM-UT (ID: 502288)

## Study Area USAC Reports

[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	
<b>Rate-of-Return (ROR) Carrier Revenue Requirement</b>	
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)
<b>Revenues from Reformed Intercarrier Compensation (ICC) Rates</b>	
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)
<b>Eligible Recovery</b>	
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)
<b>Revenues from Access Recovery Charges (ARC)</b>	
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)
<b>Connect America Fund (CAF) ICC Support**</b>	
25	Connect America Fund (CAF) ICC Support (Line 20 - Line 24)
<b>Revised CAF ICC Support with Imputed ARC Revenues for Broadband-Only Loops</b>	
26	ARC Revenue Adjustment
27	<b>Adjusted Test Period 2017-2018 CAFICC Support (Line 25 - Line 26)</b>

**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.





# 2017 CAF ICC Data Collection

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Logged in User: Jaye Rishard

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**Study Area: ALL WEST COMM-UT (ID: 502288)**

## Access Recovery Charges

[Recalculate ARC Rates & CAF Support revenues](#)

[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
Coalville										
Deer Mountain										
Jordanelle										
Kamas										
Randolph										
Timberlakes										
<b>Study Area Summary</b>										

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: ALL WEST COMM-UT

Jenny Prescott

Digitally signed by Jenny Prescott DN:cn=Jenny Prescott,email=jenny.prescott@allwest.com,O=all west comm-ut,l=Kamas UT 84036, Date:5/21/2017

Date: 5/21/2017

Signature of Authorized Officer:

Printed name of Authorized Officer: Jenny Prescott

Title or position of Authorized Officer: VP Customer Service & Finance

Telephone number of Authorized Officer: 435-783-4913

Study Area Code of Reporting Carrier

502288

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: ALL WEST COMM-UT

Signature of Authorized Officer: Jenny Prescott

Digitally signed by Jenny Prescott DN:cn=Jenny Prescott,email=jenny.prescott@allwest.com,O=all west comm-ut,l=Kamas UT 84036, Date:5/21/2017

Date: 5/21/2017

Printed name of Authorized Officer: Jenny Prescott

Title or position of Authorized Officer: VP Customer Service & Finance

Telephone number of authorized officer: 435-783-4913

Study Area Code of Reporting Carrier

502288

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: ALL WEST COMM-UT

Signature of Authorized Officer or employee: **Jenny Prescott**  
Digitally signed by Jenny Prescott DN:cn=Jenny Prescott,email=jenny.prescott@allwest.com,O=all west comm-ut,l=Kamas UT 84036, Date:5/21/2017  
Date: 5/21/2017

Printed name of Authorized Officer or employee: Jenny Prescott

Title or position of Authorized Officer or employee: VP Customer Service & Finance

Telephone number of Authorized Officer or employee: 435-783-4913

Study Area Code of Reporting Carrier	502288		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: ALL WEST COMM-UT

Jenny Prescott

Digitally signed by Jenny Prescott DN:cn=Jenny Prescott,email=jenny.prescott@allwest.com,O=all west comm-ut,l=Kamas UT 84036, Date:5/21/2017

Signature of Authorized Officer or employee:

Date: 5/21/2017

Printed name of Authorized Officer or employee: Jenny Prescott

Title or position of Authorized Officer or employee: VP Customer Service & Finance

Telephone number of Authorized Officer or employee: 435-783-4913

Study Area Code of Reporting Carrier

502288

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.

**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	502288
2	Carrier Study Area Name	alpha characters	ALL WEST COMMUNICATIONS-UT
3	Service Provider Identification Number	9 numeric digits	143002572
4	Residential Local Service Charge Effective Date	mm/dd/yy	06/01/17
5	Contact Name	alpha characters	Prescott, Jenny
6	Contact Telephone Number (include area code)	9 numeric digits	435-783-4913
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						435336	Residential
10						435336	Lifeline
11						435783	Residential
12						435783	Lifeline
13						435785	Residential
14						435793	Residential
15						435793	Lifeline

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			
<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>All West Communications</u>			
Signature of authorized officer <u>Jenny R. Prescott</u>			Date <u>6/7/17</u>
Printed name of authorized officer <u>Jenny Prescott</u>			
Title or position of authorized officer <u>Vice President of Finance/HR</u>			
Telephone number of authorized officer: <u>(435) 783-4913</u> , ext.			
Study Area Code of Reporting Carrier	<u>502288</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>07/01/2017</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				All West Communications			
Signature of authorized officer					Date	6/7/17	
Printed name of authorized officer			Jenny Prescott				
Title or position of authorized officer			Vice President of Finance/HR				
Telephone number of authorized officer: (435) 783-4913, ext.							
Study Area Code of Reporting Carrier		502288		Filing Due Date for this form (mm/dd/yyyy)		07/01/2017	