

Maine TEAF & ConnectME Fund

Quarterly Carrier Revenue Report & Self Invoice

Please read the [instructions](#) and complete the report using MS Excel at www.r-l-s-a.com/maine/TEAFConnectME.htm

C a r r i e r	1. Carrier ID: _____ Click here to lookup the ID	The quarter being reported began on _____ / ____ / ____ month day year
	2. Carrier Name: _____	
	3. Carrier Address: _____	
	4. City, State, Zip Code: _____	
	5. Carrier Telephone #: _____	
C o n t a c t	6. Contact Name: _____	This report is due to arrive, with any appropriate payment, by the 15th of the month following the end of the quarter.
	7. Street Address: _____	
	8. City, State, Zip Code: _____	
	9. Contact Phone #(s): _____	
	10. E-Mail Address: _____	

This report replaces a previous submission for the same quarter

Companies who have had assessable quarterly revenues of \$12,500+ and companies that have collected assessments from customers must submit reports. Companies not yet over \$12,500 must submit this report quarterly or notify the administrator of not reaching the threshold.

	ConnectME	Maine TEAF
11. Retail VOIP, Cable, ISP & Satellite TV Revenues Billed to Customers in Maine		
12. Billed Intrastate Retail Telecommunications Revenues (exclude 5% SPT)		← ≈ →
13. Total Billed Retail Revenues Line 11 plus Line 12 =		
14. Uncollectible Revenue [Optional]	-	-
15. Total Billed Retail Revenues Subject to Assessment Line 13 minus Line 14 =		Line 12 minus 14 =
16. Were Assessments Billed to Customers? (Yes/No)	[]	[]
17. Assessment Rate Rates are posted at www.r-l-s-a.com/maine/TEAFConnectME.htm	X	X
18. Assessment Due for this Quarter Product of Lines 15 and 17 =		Line 15 x Line 17 =
19. Account (Credit), Debt or (TEAF Support) Enter credit as a negative, debt as a positive value		(Credit) or Debt
20. Net Remittance Amount above \$1 (Payments are due by the 15th) Line 18 plus Line 19 =		line 18 plus line 19 =
If collecting assessments from customers, the reporting threshold does not apply.	Payee = ConnectME	Payee = MTEAF

Unsigned reports may be sent by email but will only be accepted from a preauthorized email address. Contact the administrator to register.

Please do not submit multiple copies of this report.

Signed worksheets may be submitted by fax, email, postal mail or courier. Under penalties as provided by law, I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. I further acknowledge the Administrator's authority to request additional supporting information as may be necessary.

21. _____
Date Authorized Signor's Name Authorized Signor's Signature Signor's Title

Maine Administration Rolka Loubé Saltzer Associates (Tax ID:30-0410008) E-Mail: efile@r-l-s-a.com www.r-l-s-a.com/maine/TEAFConnectME.htm Phone: 717-237-6748 Fax: 888-811-6920	Send payments by US Mail, addressed to Maine Funds P.O. Box 62276 Baltimore, MD 21264-2276 or by ACH or Fedwire (See instructions for details)	or send by courier, addressed to Maine Funds M&T Bank Lockbox 62276 1800 Washington Blvd., 8th floor Baltimore, MD 21230 phone (410) 347-6245
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