

State of Vermont - Universal Service Fund

Fiscal Year 2011/2012 Carrier Revenue Report & Invoice

Please read the [instructions](#) and complete the report using MS Excel at <http://www.r-l-s-a.com/vermont/>

Select Month / Quarter / Annual

C a r r i e r	1.	VTUSF Assigned ID: _____ Click here to lookup the ID	<input type="radio"/> JUL 2011 <small>due by 8/15/11</small> <input type="radio"/> AUG 2011 <small>due by 9/15/11</small> <input type="radio"/> SEP 2011 <small>due by 10/14/11</small> <input type="radio"/> OCT 2011 <small>due by 11/15/11</small> <input type="radio"/> NOV 2011 <small>due by 12/15/11</small> <input type="radio"/> DEC 2011 <small>due by 1/16/12</small> <input type="radio"/> JAN 2012 <small>due by 2/15/12</small> <input type="radio"/> FEB 2012 <small>due by 3/15/12</small> <input type="radio"/> MAR 2012 <small>due by 4/16/12</small> <input type="radio"/> APR 2012 <small>due by 5/15/12</small> <input type="radio"/> MAY 2012 <small>due by 6/15/12</small> <input type="radio"/> JUN 2012 <small>due by 7/16/12</small>
	2.	Carrier Name: _____	
	3.	Carrier Address: _____	
	4.	City, State, Zip Code: _____	
	5.	Carrier Telephone #: _____	
C o n t a c t	6.	Contact Name: _____	
	7.	Street Address: _____	
	8.	City, State, Zip Code: _____	
	9.	Contact Phone #(s): _____	
	10.	E-Mail Address: _____	

This report replaces a previous submission

		July - August 2011		Sep 2011 - Jun 2012	
B i l l e d R e t a i l R e v e n u e s	<small>Retail revenues are derived from the provision of intrastate, interstate & international services to end users.</small>				
	11.	Local Exchange _____ (See instructions for definitions)			
	12.	End User SLCs (Federal) _____			
	13.	Enhanced Services _____			
	14.	Private Lines _____			
	15.	Toll Telephone Service (originating, terminating or billed to VT address) _____			
	16.	Operator Service _____			
	17.	Directory Assistance _____			
	18.	Pay Telephone (non-coin revenues) _____			
	19.	Mobile, Cellular, PCS _____			
	20.	2-Way Cable TV _____			
	21.	Total Billed Retail Revenues Subject to Vermont USF Assessment <small>Sum of Lines 11 thru 20 =</small>			
	A c c r u a l A c c o u n t i n g	22.	Applicable Assessment Rate <small>Find Rates at http://www.r-l-s-a.com/vermont/</small> X _____	X	X
		23.	Assessment Based on Billed Retail Revenues <small>Line 21 multiplied by line 22 =</small>		+
		24.	Uncollectible Assessments _____		-
	O R	25.	Total Assessments Expected to be Collected <small>Sum of amounts on Line 23 minus line 24 =</small>		
		26.	Assessments Received from Vermont Retail Customers		
	27.	Assessments for Period <small>(Enter accrual total from line 25 OR cash assessments collected from line 26.)</small> <small>Line 25 OR line 26 =</small>			

A d j u s t m e n t s	28.	Outstanding Account (Credit) or Debt _____	+	
	29.	Lifeline Credits _____	-	
	30.	Allowable Lifeline Administrative Expenses <small># Lifeline customers X Avg credit per cust. =</small>	-	
	31.	Gross Total <small>Line 27 plus Line 28 minus Line 29 minus Line 30 =</small>		
	<small>Assessments not received on or before the scheduled date are subject to a one and a half percent (1.5%) penalty per monthly cycle (18% cumulative APR), e.g. if the amount due is \$200 and is received on the 19th, the penalty will be \$3. If the amount due is \$5,000, then a \$75 penalty is charged per monthly cycle.</small>			
32.	Estimated Late Payment Charge _____	+		
33.	Total Remittance Due (Payments can be made by check, EFT or by ACH) <small>Line 31 plus Line 32 =</small>			

Under penalties as provided by law, submission of this Revenue Report & Invoice has been authorized by the above named company, 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.

34. _____

Date	Authorized Signor's Name	Authorized Signor's Signature	Signor's Title
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VTUSF Administration Rolka Loube Saltzer Associates (Tax ID:30-0410008) E-Mail: efile@r-l-s-a.com http://www.r-l-s-a.com/vermont/ Phone: 717-237-6748 Fax: 888-811-6920	Send by US Mail to VTUSF P.O. Box 64777 Baltimore, MD 21264-4777 or file via fax or with prior approval, send by email	or send by courier to VTUSF M&T Bank Lockbox 64777 1800 Washington Blvd., 8th floor Baltimore, MD 21230 phone (410) 347-6245
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