Arkansas High Cost Fund

Year 2013 Carrier Revenue Report & Self Invoice

Please read the instructions at www.ruraltelcom.com and complete the report using MS Excel at www.ruraltelcom.com

To avoid penalties, ensure that this report and any payment due is received by the administrator before the due date

Carrier

1	ARHCF Assigned ID**:	
2	Company Name:	
3	Street Address:	
4	City, State, Zip :	
5	Phone Number:	

Contact

6	Name:	
7	Street Address:	
8	City, State, Zip :	
9	Phone Number:	
10	E-mail Address:	

☐ CHECK HERE IF THIS REPLACES A PREVIOUS SUBMISSION

Reporting period	CHECK ONE	DUE DATE
JANUARY		FEBRUARY 21, 2013
FEBRUARY		MARCH 21, 2013
MARCH		APRIL 22, 2013
APRIL		MAY 21, 2013
MAY		JUNE 21, 2013
JUNE		JULY 22, 2013
JULY		AUGUST 21, 2013
AUGUST		SEPTEMBER 20, 2013
SEPTEMBER		OCTOBER 21, 2013
OCTOBER		NOVEMBER 21, 2013
NOVEMBER		DECEMBER 20, 2013
DECEMBER		JANUARY 22, 2014
QTR - JAN - MAR 2013		APRIL 22, 2013
QTR - APR - JUN 2013		JULY 22, 2013
QTR - JUL - SEP 2013		OCTOBER 21, 2013
QTR - OCT - DEC 2013		JANUARY 22, 2014
ANNUAL - JAN - DEC 2013		FEBRUARY 21, 2014

Assessment

11	Intrastate Retail Revenues Only>>	
12	Uncollectible Intrastate Retail Revenues>>>>>>>>>>>>>>>>>>>>>>>>>>>>	
13	Revenue Subject to Arkansas HCF Assessment>>>>>>>>>>>>>>>>>>>>>>>	
14	Applicable Assessment Rate>>	2.00%
15	Total ARHCF Assessment>>	

Remit

16	Outstanding Debt, (Credit) or (Fund Support Amount)	
17	Total Remittance Due to the administrator on or before due date	

Payments may be made by EFT, ACH or by Check. Make payable to ARHCF and note your assigned ID on Checks
Payments that ARRIVE after the due date will be subject to a late payment charge. ACH payments arrive the next business day. Fed wire same day

Unsigned reports may be submitted by email but will only be accepted from a preauthorized email address. Email ruraltelcom@ruraltelcom.com for authorization.

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

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Date	Authorized Signor Name	Authorized Signor Signature	Signor Title

Submit by US Mail: ARHCF
PO BOX 608
DANVILLE, AR 72833

Submit by courier : ARHCF
RURAL TELCOM SOLUTIONS, LLC
810 DAN ARK CIRCLE
DANVILLE, AR 72833

Submit by fax: 479-495-5995

QUESTIONS: CONTACT RURAL TELCOM SOLUTIONS, LLC AT 479-495-5881 OR RURALTELCOM@RURALTELCOM.COM