IDAHO UNIVERSAL SERVICE FUND MONTHLY SURCHARGE

INSTRUCTIONS FOR IUSF FORM 1.0

WHEN TO FILE:

Monthly data should be mailed or e-mailed in time to reach the Administrator's office by the first day of the month. A check for the amount of the Total Monthly Surcharge (IUSF Form 1.0, line 10) should accompany the Form 1.0. Checks should be made payable to Idaho Universal Service Fund. If you choose to electronically transfer funds directly into the account, the funds should be transferred by the first of the month. **Please do not send cash.**

WHERE TO FILE:

Monthly reports and accompanying checks should be sent to:

Alyson Anderson, Administrator Idaho Universal Service Fund 1964 North 300 East Centerville, UT 84014~1085

Phone:	801~294~5343
Fax:	801~294~5143
E-Mail:	alyson_anderson@msn.com

Electronic payments should be sent to:

US Bank Boise, ID AB Number: 123103729

Idaho Universal Service Fund Account Number: 153395058917

COMPANY NAME:

Fill in the name of the Local Exchange Company or Toll Carrier for which you are submitting information. If you are reporting data for more than one company, please prepare separate forms for each company.

If a company provides both local and toll services a single form can be used to report total surcharge revenues.

REPORTING PERIOD:

Companies should report data based on the last complete monthly billing cycle billed by the first day of the calendar month preceding the due date of the Form 1.0. For example, a report due on September 1st would most likely be for the July reporting period.

SECTIONS TO COMPLETE:

LOCAL EXCHANGE SERVICES

Indicate the number of residence and business lines in service during the month to which the surcharge applies on lines 1 and 3. Pro-rated charges are the surcharge for lines in service for a partial month. The Total Local Surcharge (the sum of lines 1 through 4) should be shown on line 5.

MTS/WATS TYPE TOLL SERVICES

Indicate the Idaho intrastate billed MTS and WATS minutes for the reporting period on line 6. Report the corresponding revenue on line 9. Multiply line 7 (surcharge rate) by line 6 (intrastate minutes) to determine the Total MTS/WATS Surcharge on line 8.

TOTAL MONTHLY SURCHARGE REVENUES

The Total Monthly Surcharge on line 10 should be the sum of lines 5 and 8. A check or transfer for this amount should be forwarded with the Form 1.0 to the Administrator by the first day of the month.