

**Oklahoma Universal Service Fund
FY2020/2021 Carrier Remittance Worksheet
(please read complete instructions before completing)**

A. Company Code: **OK**

B. Submission Date:		
C. Revenue Data Month(s):		
Jul-20	Aug-20	Sep-20
Oct-20	Nov-20	Dec-20
Jan-21	Feb-21	Mar-21
Apr-21	May-21	Jun-21
Annual (July 2020 - June 2021)		
F: ORIGINAL		REVISION

SECTION 1 - CARRIER IDENTIFICATION	
1. Company Name	
1a. Complete Mailing Address	
1b. Telephone:	E-Mail Address:
2. Primary Communications Business (Please "X" primary business and <input checked="" type="checkbox"/> other categories being reported)	
I L E C	X I X C R E S C L E C C A P C E L L P C S O P S P S P P A G V o I P S A T
3. Agent Company:	
3a. Complete Mailing Address:	
3c. Telephone:	E-Mail Address:

SECTION 2 - MONTHLY INTRASTATE RETAIL REVENUE DATA	
4. LOCAL EXCHANGE SERVICE.....	4. _____
5. LOCAL PRIVATE LINE.....	5. _____
6. WIRELESS MONTHLY CHARGES	6. _____
7. WIRELESS USAGE CHARGES	7. _____
8. INTRASTATE SWITCHED TOLL	8. _____
9. TOLL PRIVATE LINE	9. _____
10. ALTERNATIVE ACCESS & DIRECTORY	10. _____
11. PAY TELEPHONE	11. _____
12. INTERCONNECTED VOIP.....	12. _____
13. MISCELLANEOUS CHARGES	13. _____
14. TOTAL INTRASTATE RETAIL REVENUE (SUM OF LINES 4 THROUGH 13).....	14. _____

ILLUSTRATIVE

SECTION 3 - REMITTANCE CALCULATION	
15. 2020-2021 ASSESSMENT RATE	15. 0.0628
16. GROSS OUSF ASSESSMENT (Line 14 x Line 15)	16. \$ _____

Remittances received after the due date are subject to one and one half percent (1.5%) late payment interest.

SECTION 4 - CHANGE IN COMPANY STATUS	
17. New Business Start Date: _____	
18. Business Status Change Date: _____	Carrier Name Changed To: _____
	Business Sold To: _____
	Business Discontinued, Revenue Termination Date: _____
	Business Merged With: _____

SECTION 5 - CERTIFICATION			
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 acknowledge GVNW's authority to request additional information as necessary.			
19. _____	_____	_____	_____
Date	Officer Name	Officer Signature	Officer Title
20. _____	_____	_____	_____
Date	Contact Name	Contact Phone	Contact Title
21. Complete Contact Mailing Address: _____			
22. Contact Email Address: _____			

Questions: OUSF Fund Manager GVNW Consulting, Inc. 2930 Montvale Dr, Ste B Springfield, IL 62704 (217) 862-1560 (Phone) (217) 698-2715 (Fax) www.gvnw.com	Make checks payable to "OUSF" and send First Fidelity Bank c/o Brad Traynor/Treasury Dept./OUSF PO Box 271446 Oklahoma City, OK 73137	Please submit Worksheet Directly to GVNW Consulting, Inc. at: www.gvnw.com/USF/OklahomaUSF.aspx (Online Via E-File)
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