TELECOMMUNICATION RELAY SURCHARGE REMITTANCE FORM

Telecommunication Company: ________________________________
Address: ____________________________________________

Phone: ______________________________________________
Person Completing This Form: ____________________________

Surcharges for the Month of: ____________________________

<table>
<thead>
<tr>
<th>Description</th>
<th>Lines</th>
<th>Rate</th>
<th>Remittance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access lines or PBX Trunk Lines</td>
<td></td>
<td>$0.09</td>
<td></td>
</tr>
<tr>
<td>Centrex Lines</td>
<td></td>
<td>$0.01125</td>
<td></td>
</tr>
<tr>
<td>Total Remittance</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Do you own or lease the lines that you are reporting? ______________________________________

If you lease your lines, who do you lease from? ___________________________________________

IMPORTANT: THERE ARE NO EXEMPT LINES FROM THE RELAY SURCHARGE.

ALL REGISTERED TELECOMMUNICATION COMPANIES THAT INVOICE THE END USER IN THE STATE OF RHODE ISLAND ARE REQUIRED TO BILL ITS RESIDENCE AND BUSINESS TELEPHONE SUBSCRIBERS A MONTHLY RELAY SURCHARGE. THE MONTHLY AMOUNTS COLLECTED WILL BE REMITTED TO THE DIVISION OF PUBLIC UTILITIES AND CARRIERS. THIS RELAY SURCHARGE IS NOT UNDER THE STATUTORY JURISDICTION OF THE RI DIVISION OF TAXATION. SEE RHODE ISLAND GENERAL LAW 39-1-42.

NOTE: THE MONTHLY RELAY ASSESSMENT FOR A PBX TRUNK IS ONE $.09 SURCHARGE FOR EACH TRUNK. EACH CENTREX STATION LINE IS BILLED ONE-EIGHTH OF THE CURRENT RATE OF $.09.

__________________________________________ Signature ____________________________ Date

PLEASE REMIT THIS FORM WITH PAYMENT BY THE 20th OF THE FOLLOWING MONTH TO:

RI Division of Public Utilities & Carriers
Accounting Section
89 Jefferson Blvd
Warwick RI 02888