

June 15, 2022

CONFIDENTIAL DOCUMENTS ENCLOSED

Mr. Adam Teitzman Office of the Commission Clerk Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850

REDACTED

RE: PSC Docket No. 20220074-TP – ITS Telecommunications Systems, Inc. d/b/a ITS Fiber ("ITS Fiber") CAF/ICC Recovery Data Collection

Dear Mr. Teitzman:

In accordance with 47 C.F.R §51.917(d) and §51.917(e), ITS Fiber is certifying that as a Rate-of-Return Carrier we are eligible for CAF/ICC Recovery. ITS Fiber is also certifying that it is not seeking duplicate recovery per 47 C.F.R. §51.917(d)(vii).

With this in mind, you will find documents associated with the recovery for CAF/ICC and that ITS Fiber is filing them under a claim of confidentiality pursuant to the Section 364.183(1) of the Florida Statutes, and Rule 25-22-006(5)(a) of the Florida Administrative Code. One highlighted copy is sealed in an envelope marked "CONFIDENTIAL" with the confidential information highlighted in yellow and two redacted copies that are available for public inspection are enclosed.

If you should have any questions regarding this filing, please contact Donna J. Marreel at 772-597-3161 or at dmarreel@bluestreamfiber.com.

Sincerely,

Bruce Russell Director, Procurement

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ECO
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(IDM) I reducted copy
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Mailing address: PO Box 397 • Payments: PO Box 308 • Office: 15931 SW Warfield Blvd.| Indiantown, FL 34956 Business Services: 772.597.3423 • Home Services: 772.597.2111 • Tech Support & Repair: 772.587.4140

Certification of O	fficer as to the Acc	curacy of the CAF ICC Data	Reported
I certify that I am an officer of t accuracy of the actual data repo this form is accurate.			
Name of Reporting Carrier	ITS Telecommu	nications Systems, Inc.	
Signature of Authorized Officer	Bon Fund	Date	6/14/22
Printed name of Authorized Officer	Bruce Russell		
Title or position of Authorized Officer	Director, Procure	ement	
Telephone number or Authorized Officer.	(772) 597-21	06	
Study Area Code of Reporting Carrier	210331	Filing Due Date for this form (mm/dd/yyyy)	06/16/2022
Persons willfully making false statemen of 1934, 47 U.S.C. §§ 502, 503(b), or fi			

Certification of Officer	for Rate-of-Return	1 Carrier Eligibility for CAF	/ICC Recovery
I certify that I am an officer of the reporting carrier on this form ce Access Recovery Charge §51.917 to §51.917(f).	ertifies that it has c	omplied with Eligible Recov	ery §51.917(d) and
Name of Reporting Carrier	ITS Telecommun	nications Systems, Inc.	
Signature of Authorized Officer	3~ Rug/	Date	6/14/22
Printed name of Authorized Officer	Bruce Russell		((
Title or position of Authorized Officer	Director, Procure	ement	
Telephone number or Authorized Officer.	(772) 597-21	06	
Study Area Code of Reporting Carrier	210331	Filing Due Date for this form (mm/dd/yyyy)	06/16/2022
Persons willfully making false statemen of 1934, 47 U.S.C. §§ 502, 503(b), or fit			

Certification of Officer I certify that I am an officer of t reporting carrier is not seeking subject to the recovery mechanic	he reporting carrie duplicative recover	y in the state jurisdiction for	knowledge, the
Name of Reporting Carrier	ITS Telecommun	nications Systems, Inc.	
Signature of Authorized Officer	B- Fund	Date	6/14/22
Printed name of Authorized Officer	Bruce Russell		•
Title or position of Authorized Officer	Director, Procure	ement	
Telephone number or Authorized Officer.	(772) 597-21	06	
Study Area Code of Reporting Carrier	210331	Filing Due Date for this form (mm/dd/yyyy)	06/16/2022
Persons willfully making false statemen of 1934, 47 U.S.C. §§ 502, 503(b), or fi			

to Authorize a			on of Officer ta on Behalf of Report	ing Car	rrier	
I certify that (Name of Agent) <u>Ja</u> reported on behalf of the report my responsibilities include ensu- to the best of my knowledge, the	ing carrier. ring the acc	I also o uracy o	certify that I am an off f the data provided to	icer of the Aut	the reporting c thorized Agent	
Name of Authorized Agent	John Stau	rulakis, I	Inc. (JSI)			
Name of Reporting Carrier	ITS Telec	ommun	ications Systems, Inc.			
Signature of Authorized Officer	Banque	N		Date 6	14/22	
Printed name of Authorized Officer	Bruce I	Russell				
Title or position of Authorized Officer	Director,	Procure	ment			
Telephone number or Authorized Office	er. (77	2) 597	-2106			
Study Area Code of Reporting Carrier	210331		Filing Due Date for this (mm/dd/yyyy)	form	06/16/2022	
Persons willfully making false statemen of 1934, 47 U.S.C. §§ 502, 503(b), or fi						

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Filing Entity:	ITS Telecommunications Systems, Inc.		Dedeeted	
COSA:	210331	h	Redacted	
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	Revenue Requirement	7/1/2021- 6/30/2022	7/1/2022- 6/30/2023	Change
1	2011 Interstate Switched Access Revenue Requirement	Sind-Adda		
2	FY 2011 Intrastate Terminating Switched Access Revenues			
3	FY 2011 Net Reciprocal Compensation Revenues			
4	2011 ROR Carrier Base Period Revenue (Line 1 + Line 2 + Line 3)			
5	ROR Carrier Baseline Adjustment Factor (reduced 5% each year)			
6	ROR Carrier Revenue Requirement (Line 4 x Line 5)			
7	NECA Administrative Expenses (n/a)			
8	Total ROR Carrier Revenue Requirement (Line 6 + Line 7)			
Constant Sec.	Estimated Switched Access Revenues			
9	Interstate Switched Access Revenues			
10	n/a			
11	Transitional Intrastate Access Service Revenues			
12	Net Transitional Reciprocal Compensation Revenues			
13	Total Estimated ICC Switched Access Revenue (Line 9 + Line 11 + Line 12)			
14	TRS Increment (n/a for average schedule companies)			
15	Regulatory Fees Increment (n/a for average schedule companies)			
16	NANPA Increment (n/a for average schedule companies)			
17	n/a			
18	Adjustment for Double Recovery or Corrections, NECA Admin Expenses			
	True-Up Test Year >>>>	2019-2020	2020-2021	
19	Prior Period Trueup - Net Impact on Total Eligible Recovery (Total of 19A-19G)			
19A	Test Period Trueup Interstate Access			
19B	Test Period Trueup Intrastate Terminating Access			
19C	Test Period Trueup Net Recip Comp			
19D	Test Period Trueup ARCs			
19E	Test Period Trueup TRS Increment			
19F	Test Period Trueup Regulatory Fees Increment			
19G	Test Period Trueup NANPA			
20	Eligible Recovery (Line 8 - Line 13) + (Line 14 + Line 15 + Line 16 + Line 18 + Line 19) - (Line 17)			

	Test Year Estimated ARC Revenues		
21	Residential ARC Revenues		
22	Single Line Business ARC Revenues		
23	Multi-Line Business ARC Revenues		
24	Imputed ARC from CBOL Lines		
25	Total ARC Revenues (Line 21 + Line 22 + Line 23 + Line 24)		
	and the second	STRAND CONTRACTOR	
26	Connect America Fund (CAF) ICC Support including prior period true-up (Line 20 - Line 25)		
27	Monthly		