NORTH DAKOTA TELECOMMUNICATIONS RELAY SERVICE FUND
QUARTERLY SURCHARGE RETURN

INFORMATION TECHNOLOGY DEPARTMENT
SFN 19436 (7-2011)

Name	Federal Tax ID	Quarter Ending	Due Date of this Return

Address	City	State	Zip Code

	1st Month of Quarter Column A	2nd Month of Quarter Column B	3rd Month of Quarter Column C
1. Number of access lines			
2. Number of cellular and/or radio numbers			
3. Total (Line 1 plus Line 2)			
4. Total collected (Line 3 X .038) ($0.04 less 5% Administrative Expenses = .038)	$	$	$

TOTAL DUE WITH RETURN (Total of Line 4, Column A, B and C)	$

☐ If out of business, check this box and enter the last day of business. — Last Day of Business

☐ If change in ownership, check this box and complete the following information. — Name of New Owner

Address of New Owner	City	State	Zip Code

☐ If information regarding preparer has changed, check this box.

Name of Preparer	Title

E-mail Address	Telephone Number

I declare that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

Signature of Preparer _____ Date _____

MAIL TO:

Information Technology Department
600 East Boulevard Ave Dept 112
Bismarck ND 58505-0100

PLEASE DO NOT WRITE IN THIS SPACE