



C.R.S.T Telephone Authority

July 2, 2012

South Dakota Public Utilities Commissions
Capitol Building, 1st floor
500 E. Capital Ave.
Pierre, SD 57501-5070

Dear Sirs/Madams:

As required by §54.304, we are enclosing C.R.S.T. Telephone Authority's output forms that have been submitted to USAC and the FCC by NECA. We are also including the certifications submitted.

These are provided to the Commission as an informational, non-docketed filing but please note that the output forms are being filed as confidential documents.

If you have any questions or need more information, please contact Anita Anderson, Controller at (605)964-2600.

Sincerely,

Mona L. Thompson
Interim General Manager

CERTIFICATION FORM

TO BE COMPLETED BY AN OFFICER OF THE REPORTING CARRIER

Certification of Officer for Rate-of-Return Carrier Eligibility for CAF/ICC Recovery

I certify that I am an officer of the reporting carrier and that, to the best of my knowledge, the reporting carrier on this form certifies that it has complied with Eligible Recovery §51.917(d) and Access Recovery Charge §51.917(e) and is eligible to receive the CAF/ICC support requested pursuant to §51.917(f).

Name of Reporting Carrier				Cheyenne River Sioux Tribe Telephone Authority	
Signature of authorized officer		<i>Ivan Bruguier</i>		Date	05/23/2012
Printed name of authorized officer		Ivan Bruguier			
Title or position of authorized officer		Board Chairman			
Telephone number of authorized officer:		(605) 964-2600			
Study Area Code of Reporting Carrier	391647	Filing Due Date for this form (mm/dd/yyyy)	06/18/2012		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

TO BE COMPLETED BY THE REPORTING CARRIER,

Certification of Officer as to the Accuracy of the CAF ICC Data Reported

I certify that I am an officer of the reporting carrier, my responsibilities include ensuring the accuracy of the actual data reported; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier Cheyenne River Sioux Tribe Telephone Authority			
Signature of Authorized Officer <i>Ivan Bruguier</i>	Date 05/23/2012		
Printed name of Authorized Officer Ivan Bruguier			
Title or position of Authorized Officer Board Chairman			
Telephone number of Authorized Officer: (605) 964-2600 ext.			
Study Area Code of Reporting Carrier	391647	Filing Due Date for this form (mm/dd/yyyy)	06/18/2012

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TO BE COMPLETED BY AN OFFICER OF THE REPORTING CARRIER

Certification of Officer for Rate-of-Return Carrier Not Seeking Duplicative Recovery

I certify that I am an officer of the reporting carrier and that, to the best of my knowledge, this reporting carrier is not seeking duplicative recovery in the state jurisdiction for any Eligible Recovery subject to the recovery mechanism as per 51.917(d)(vii).

Name of Reporting Carrier **Cheyenne River Sioux Tribe Telephone Authority**

Signature of authorized officer *Ivan Bruguier* Date **05/23/2012**

Printed name of authorized officer **Ivan Bruguier**

Title or position of authorized officer **Board Chairman**

Telephone number of authorized officer: **(605) 964-2600**

Study Area Code of Reporting Carrier **391647** Filing Due Date for this form (mm/dd/yyyy) **06/18/2012**

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