

**Oklahoma Universal Service Fund
Funding Year 2026-2027 Remittance Worksheet Instructions**

OUSF REQUEST FOR AUTHORIZATION TO REPORT QUARTERLY

CONNECTIONS-BASED METHODOLOGY JULY 2026 – JUNE 2027

Contributing Providers seeking to report the OUSF on a calendar quarter must submit the following information:

Contributing Provider Information:

Company Code: OK- _____ Company Name: _____

Contact Name: _____ Title: _____

Phone #: _____ E-Mail: _____

CONNECTION COUNTS

1) Report the Number of Connections for the Most Current Quarter					
a) Quarter		Number of Connections			
2) Report the Number of Connections for the Previous Four Quarters					
	Please select Quarter			% Variance	
a) Quarter		Number of Connections		% Variance	
b) Quarter		Number of Connections		% Variance	
c) Quarter		Number of Connections		% Variance	
d) Quarter		Number of Connections		% Variance	
			Total Variance from 1 st to Last Quarter		

The connection counts for each of the Previous Four Quarters listed above cannot vary more than 5% in any given quarter as compared to the previous quarter. Additionally, there cannot be a variance of more than 5% between the first quarter listed in a) above, and the last quarter listed in d) above.

Under penalties as permitted by Oklahoma law, I certify that I have reviewed the above listed information and that the information is true and correct to the best of my knowledge.

Authorized Signature: _____

Date: _____

*Please submit to: Vantage Point Solutions, OUSF Manager,
2930 Montvale Dr, Ste B, Springfield, Illinois, 62704. E-Mail: ousf@vantagepnt.com*