Electronic Assessment Survey Response Supplier Quick Reference Guide

1. Log into eDocket with your eDocket username and password associated with the Commission's Assessment Portal.

ABOUT	EDOCKET SYSTEM	ORDERS/REPORTS/REGULA	TIONS UTILITIES	CLEAN ENERGY	CONSUMERS' CORNER	NEWSROOM	FILE A COMPLAINT	
		Welcome to the Pub	lic Service Commis	sion's Electronic D	ocket System (eDocket)			
		Please en	er your login details to	access the system and f	ile documents.			
		Userna	me*					
		Passwo	rd'					
				Login				
				-Or				
			Login with r	ny O365 account	-			
		Help Fo	rgot User ID Forgot P	assword New User Se	arch Dockets			

2. On the "My Filings" page, click Assessments.

A	FILINGS	NEW FILING	SEARCH DOCKETS	SEARCH SERVICE OUTAGE	S EDIT PROFILE	ANTEST1 TEST - ANTEST1
My F	ilings		l			
New Fi	iling Advan	ced Search Suppli	er Test Assessments	RPS Portal		
Docket	Number ‡		Filing Date 🌩	Filing Type 👙	Filing Status ≑	
EA2018-13 - 10			08/03/2023 10:52 AM	Bond - Continuation	Approved	

3. Click on the 2024 survey name hyperlink to open your 2024 assessment survey.

A FILIN	IGS	RPS	SUPPLIER TEST	ASSESSMENTS	RETAIL CHOICE	ANTEST1	G
list of Associated Su	rveys						
ast Status Date From:	DATE		To: DATE		曲		
Show 25 🗸 entries						Search	Q
Survey Name	Year	Last Status	Last Sta	atus Date	Assessed Amt - OPC	Assessed Amt - PSC	Paid Amt
AN/TEST-2024 ASMT	2024	Opened	03/25/	2024			

4. After selecting the 2024 ASMT Survey, the Survey Response form appears ready for you to fill out.

	D.I.	***			
	Υ C	OMMISSION District of Columbia ur Energy, Your Voice.		SEARCH	٩
FILINGS	RPS SUPPLIER TEST	ASSESSMENTS	RETAIL CHOICE	ANTEST1	C•
	1325 G Street N	W, Suite 800 Washington, D. Tel: (202) 626-5100	C. 20005		
	MANDATORY ANN COMPETITIVE I	IUAL ASSESSMEN OCAL EXCHANGI	IT SURVEY OF CARRIERS		
Confidential: Check box to indicate that the data contain treatment.	ed in this form should receive confidential	□ No			
Exact Legal Name of the Company:"		ACN Communication Services, (Include any name used in providi	Inc. ing service)		
FEIN:*					
Please provide the following contact	information:				
Person completing this form:		First name:"			
		Last name:*			
Telephone:*		111-111-1111			
Email:*		antest1@gmail.co	m		
Regulatory Contact		Customer Service	e Contact		
Name:*		Name:*			
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