BEFORE THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

In the Matter of Certification of Compliance)
with Section 254(e) of the Federal)
Telecommunications Act of 1996 and) Docket No. 25-GIMT-332-GIT
Certification of Appropriate Use of Kansas	
Universal Service Fund Support	

WILSON TELEPHONE COMPANY, INC. ELIGIBLE TELECOMMUNICATIONS CARRIER CERTIFICATION AND INFORMATION

Pursuant to Order of the Commission herein Wilson Telephone Company, Inc. submits its certification and information supporting its continuing designation as an Eligible Telecommunications Carrier.

Wilson Telephone Company, Inc.'s attachments other than Attachments 1 and 5 certifications are filed herewith as proprietary and confidential under seal. The carrier believes that the information contained in these attachments are of such competitive sensitivity that disclosure to any person other than the carrier, the Commission, and Staff is prohibited by K.S.A. 66-1220(a). Disclosure of trade secrets and confidential information to any person, including parties to this proceeding, is prohibited unless the Commission finds the disclosure is warranted, after considering all of the factors in that statute. The carrier believes that disclosure of the information contained in these attachments would have a significant and adverse impact on its competitive stance regarding existing or potential competing entities including wireless carriers, competitive local exchange carriers, and incumbent local exchange carriers. Regulatorily mandated disclosure of any or all of the subject information would create a competitive bias in favor of any actual or potential competitor not required to provide comparable

information, reducing or eliminating any benefit to consumers otherwise resulting from unbiased competition and damaging the submitting company's ability to engage in fair competition.

Respectfully submitted,

Mark Doty #14526

GLEASON & DOTY, CHARTERED

401 S. Main, Suite 102

Ottawa, KS 66067

(785) 242-3775

Attorney for Wilson Telephone Company, Inc.

THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

Before Commissioners: Andrew J. French, Chairperson				
Dwight D. Keen, Commissioner Annie Kuether, Commissioner				
	Annie Kuether,	Commissioner		
In the Matter of Certification of with Section 254(e) of the Fed Telecommunications Act of 19 Certification of Appropriate U Universal Service Fund Support	leral 996 and se of Kansas))) Docket No. 25-GIM))	IT-332-GIT	
FEDERAL H FCC and KANS	IGH-COST UNIV Docket Reference AS UNIVERSAL (Please type o	CERTIFICATION VERSAL SERVICE SUPPO C: CC Docket No. 96-45 SERVICE FUND SUPPOR T print legibly) ansas Support Received)		
1. My title is	VP/General N	Manager	of <u>Wilson</u>	
Telephone Company, Inc	(Company/Cooperati	ve). In this capacity, I am in a p	position of authority to	
direct how federal high-cost Un	iversal Service Fund	(USF), including Legacy or F	Frozen high-cost Loop	
support (HCL/FHCS) Safety Val	ve support (SVS), Co	onnect America Cost Model (CA	.CM) support, Connect	
America Fund (CAF I/CAF II)	support, Alternative	Connect America Cost Mode	l (A-CAM/ACAM II)	
support, Enhanced Alternative	Connect America (Cost Model (Enhanced ACA)	M), Rural Broadband	
Experiment support (RBE), Rui	al Digital Opportun	ity Fund (RDOF) support, and	d/or Kansas Universal	
Service Fund (KUSF) support r	eceived will be used	I and by this certification I an	n binding <u>Wilson</u>	
Telephone Company, Inc (C	ompany/Cooperative)) to the statements made in this	certification.	
2. <u>Wilson</u>	Telephone Company,	Inc (Company/Cooperati	ve) was named as an	
Eligible Telecommunications Ca	arrier (ETC) by the	Kansas Corporation Commissi	on (KCC) for federal	
support purposes in Docket No.	98-GIMT-241-GI	T by order dated <u>December</u>	er 5, 1997 and KUSF	

support purposes in Docket No. <u>98-GIMT-241-GIT</u> by order dated <u>December 5, 1997</u>.

Docket No. 25-GIMT-332-GIT Attachment 1

3. By this affidavit, I certify that all federal high-cost USF, including HCL, FHCS, SVS, CAF

I/CAP II, A-CAM/ACAM II, Enhanced ACAM, RBE, RDOF, and/o KUSF releived by _____Wilson

Telephone Company, Inc __ (Company/Cooperative) was used in the proceeding calendar year 2024 and will be used in the new calendar year 2026 only for the provision, maintenance, and upgrading of facilities and services for which the support is intended, consistent with Section 254(e) of the Federal Telecommunications Act, and/or Kansas statutes and KCC requirements.

I certify under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct.

(Pursuant to Kan. Stat. Ann. 53-601.)

Signature

Craig M. Freeman, VP/General Manager

Printed/Typed Name

Executed on 6/24/25 date

Email address: craig.freeman@wilsoncom.net

Annual ETC Certification of Requirements Imposed by the Commission in Docket Number 06-GIMT-446-GIT

1. Did your company experience any outage in the prior calendar year, as that term is defined in 47 C.F.R. § 4.5, of at least 30 minutes in duration for each service area in which an Eligible Telecommunications Carrier is designated for any facilities it owns, operates, leases, or otherwise utilizes that potentially affect: (i) at least 10% of the end users served in a designated service area; or (ii) a 911 specialty facility as defined in 47 C.F.R. § 4.5(e)? (Yes/No)_No___. IF YES, PLEASE COMPLETE THE FOLLOWING:

Date and time of Onset of the Outage	Description of the Outage and its Resolution	Particular services affected	Geographic Areas Affected	Steps Taken to Prevent a Similar Situation in the Future	Number of Customers Affected
NONE					

(If necessary, please provide additional pages.)

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_	service areas please explai			_			-
potential cus		ii iio (, your	company .	and mproc	r to provi		to those
_0							
3. Please proprior calend	ovide the num ar year.	ber of compl	aints per 1,0	000 conne	ections (fix	ed or mob	ile) in the

2. Please provide the number of requests for service from potential customers within the

4. A wireline ETC must certify that it is in compliance with the Commission's quality of service standards and a wireless ETC must certify that it is in compliance with the CTIA Code. **Please complete the following, as applicable to your company:**

QUALITY OF SERVICE <u>WIRELINE</u> ANNUAL CERTIFICATION KCC Docket Reference: 06-GIMT-446-GIT

(Please type or print legibly)

- 1. My title is <u>VP/General Manager</u> of the <u>Wilson Telephone Company, Inc.</u> (Company/ Cooperative). In this capacity, I am in a position of authority to certify whether the Company/ Cooperative is complying with required quality of service standards. I am binding <u>Wilson Telephone Company, Inc.</u> (Company/Cooperative) to the statements made in this certification.
- 2. By this affidavit, I certify that <u>Wilson Telephone Company</u>, <u>Inc.</u> (Company/Cooperative) is in compliance with the Commission's quality of service standards as adopted in Docket No. 191,206-U.

I certify under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct. (Pursuant to Kan. Stat. Ann. 53-601.) Executed on 6/24/25 (date).

ignature

Craig M. Freeman / VP/General Manager

Printed/Typed Name

QUALITY OF SERVICE <u>WIRELESS</u> ANNUAL CERTIFICATION KCC Docket Reference: 06-GIMT-446-GIT

(Please type or print legibly)

1. My title is	of the
(Company/ Cooperative). In this capacity, I an	m in a position of authority to certify whether the
Company/ Cooperative is complying with requ	aired quality of service standards. I am binding
(Company/Cooperative)	to the statements made in this certification.
2. By this affidavit, I certify that _	(Company/ Cooperative) is
in compliance with the CTIA Code.	
I certify under penalty of perjury under	the laws of the state of Kansas that the foregoing is
true and correct. (Pursuant to Kan. Stat. Ann. 53-	601.) Executed on(date).
	Signature
	Print / Typed Name

5. Each ETC must certify that it will be able to function in an emergency as set forth in 47 C.F.R § 54.202(a)(2).

ABILITY TO FUNCTION IN AN EMERGENCY ANNUAL CERTIFICATION KCC Docket Reference: 06-GIMT-446-GIT

(Please type or print legibly)

- 1. My title is <u>VP/General Manager</u> of the <u>Wilson Telephone Company, Inc.</u> (Company/ Cooperative). In this capacity, I am in a position of authority to certify whether the Company/ Cooperative is able to function in an emergency. I am binding <u>Wilson Telephone</u> Company, Inc. (Company/Cooperative) to the statements made in this certification.
- 2. By this affidavit, I certify that <u>Wilson Telephone Company</u>, <u>Inc</u>. (Company/Cooperative) is capable of functioning in an emergency.

I certify under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct. (Pursuant to Kan. Stat. Ann. 53-601.) Executed on 6/24/25 (date).

Signature

Craig M. Freeman / VP/General Manager

Printed / Typed Name

6. 47 U.S.C. § 214(e)(1)(B) requires every ETC to advertise its services (including Lifeline services) throughout the service area for which it has been designated "using media of general distribution." **Please complete the following:**

Name of Media	Type of Media	Geographic Areas Reached	Dates Published
Salina Journal	Newspaper	Central KS	04/22/2024
Wilson Community Bulletin Board	Website	Central & North-Central KS	04/18/2024-05/09/2024
Cawker City Ledger	Newspaper	North-Central KS	04/25/2024
Lincoln Sentinel- Republican	Newspaper	Central KS	04/24/2024
Lucas-Sylvan News	Newspaper	Central KS	04/25/2024
Ellsworth County Independent Reporter	Newspaper	Central KS	04/25/2024

(If necessary, please attach additional pages.)

the incumbent LEC. Please provide a description of the local usage plan(s) that is comparable to that of the incumbent LEC and complete the certification.	
comparable to that of the incumbent LEC and complete the certification.	
COMPARABLE LOCAL LICACE BY AN ANNUAL CERTIFICATION	
COMPARABLE LOCAL USAGE PLAN ANNUAL CERTIFICATION KCC Docket Reference: 06-GIMT-446-GIT	
(Please type or print legibly)	
1. My title is of the	
(Company/ Cooperative). In this capacity, I am in a position of authority to certify whether	
Company/ Cooperative offers a local usage plan comparable to that of the incumbent. I	
binding(Company/Cooperative) to the statements made in	
certification.	ums
2. By this affidavit, I certify that (Compa	ıny/
Cooperative) offers a local usage plan comparable to that of the incumbent.	
I certify under penalty of perjury under the laws of the state of Kansas that the forego	_
is true and correct. (Pursuant to Kan. Stat. Ann. 53-601.) Executed	on
(date).	
(date).	
(date).	
(date)Signature	