



July 2, 2018

Via eXpress e-filing

Kansas Corporation Commission

ATTN: Executive Director
1500 SW Arrowhead Road
Topeka, KS 66604-4027

RE: ETC Certifications
Docket No. 18-GIMT-394-GIT.

Dear Executive Director,

This filing contains the required annual ETC Certifications of YourTel America, Inc. If you have any questions or need any additional information, please contact me at (405) 755-8177, ext. 103 or by email at mdean@telecompliance.net.

Sincerely,

/s/ Matt W. Dean

Matt W. Dean
Regulatory Agent

Enclosures

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

1. All ETCs must provide detailed information on any outage in the prior calendar year, as that term is defined in 47 CFR 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 CFR 4.5(e).

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
YourTel America received a waiver of this requirement in Docket 06-GIMT-446-GIT effective 11/19/2007.					

(If necessary, please provide additional pages.)

2. Please provide the number of requests for service from potential customers within the recipient's service areas that were unfulfilled during the prior calendar year. If applicable, please explain how your company attempted to provide service to those potential customers.

920 subscribers were rejected due to NLAD TPIV, Invalid Proof or because they were in a port freeze with USAC.

3. Please provide the number of complaints per 1,000 connections (fixed or mobile) in the prior calendar year.

Zero.

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 WIRELINE 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 the Company/ Cooperative is complying with required 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 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 _____ (date).

Signature

Printed/Typed Name

QUALITY OF SERVICE WIRELESS ANNUAL CERTIFICATION

KCC Docket Reference: 06-GIMT-446-GIT

(Please type or print legibly)

1. My title is Secretary of the YourTel America, Inc.
(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 YourTel America, Inc. (Company/Cooperative) to the statements made in this certification.

2. By this affidavit, I certify that YourTel America, Inc. (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 July 2, 2018 (date).



Signature

David L. Tatum

Print / Typed Name

5. Each ETC must certify that it will be able to function in an emergency as set forth in 47 CFR § 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 _____ of the _____
(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 _____(Company/Cooperative) to the statements made in this certification.

2. By this affidavit, I certify that _____ (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 _____(date).

Signature

Printed / Typed Name

6. 47 U.S.C. § 214(e)(1)(B) requires every ETC to advertise its 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
Company website	Internet	Kansas	01/2017-12/2017
Google Ad Words	Internet	Kansas	01/2017-12/2017

(If necessary, please attach additional pages.)

7. A competitive ETC must certify that it offers a local usage plan comparable to that of the incumbent. Please provide a description of the local usage plan(s) that is comparable to that of the incumbent and complete the certification.

As described in Docket No 03-TPCT-355-ETC certifying YourTel America (f/k/a The Pager Company) as an ETC, YourTel America continues to ^{provide} an incumbent comparable local usage plan to residential and business customers consisting of the following elements:

(1.) Voice grade access to the public switched telephone network (2) dual tone multi-frequency signalling or its functional equivalent (3) single party service or its functional equivalent (4) access to emergency services (5) access to operator services (6) access to directory services (7) access to specific operational custom calling features (8) direct bill of customers (9) unlimited calling within the customers local calling area for a flat monthly fee.

COMPARABLE LOCAL USAGE PLAN ANNUAL CERTIFICATION

KCC Docket Reference: 06-GIMT-446-GIT

(Please type or print legibly)

1. My title is Secretary of the YourTel America, Inc. (Company/ Cooperative). In this capacity, I am in a position of authority to certify whether the Company/ Cooperative offers a local usage plan comparable to that of the incumbent. I am binding YourTel America, Inc. (Company/Cooperative) to the statements made in this certification.

2. By this affidavit, I certify that YourTel America, Inc. (Company/ 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 foregoing is true and correct. (Pursuant to Kan. Stat. Ann. 53-601.) Executed on July 2, 2018 (date).



Signature

David L. Tatum

Printed/Typed Name