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June 26, 2025

Ms. Lynn M. Retz, Executive Director  
Kansas Corporation Commission  
1500 S.W. Arrowhead Road  
Topeka, KS 66604-4027

RE: Docket No. 25-GIMT-332-GIT

Dear Ms. Retz:

Enclosed is the Elkhart Telephone Co., Inc. Section 254(e) Certification required by the Commission to be filed in this docket.

Some information in this filing has been marked confidential. We believe the information is of such competitive sensitivity that its disclosure to any person other than the company, the Commission and Staff is prohibited by K.S.A. 66-1220a. The Commission has not issued a protective order in this docket.

Please let me know if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "Harvey Taylor". The signature is written in a cursive, flowing style.

Harvey Taylor

Enclosures

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

# Elkhart Telephone Co., Inc.

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THE STATE CORPORATION COMMISSION  
OF THE STATE OF KANSAS

Before Commissioners:      Andrew J. French, Chairperson  
   Dwight D. Keen, Commissioner  
   Annie Kuether, Commissioner

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.      )

**SECTION 254(e) CERTIFICATION**  
**FEDERAL HIGH-COST UNIVERSAL SERVICE SUPPORT**  
**FCC Docket Reference: CC Docket No. 96-45**  
**and KANSAS UNIVERSAL SERVICE FUND SUPPORT**  
(Please type or print legibly)  
**(Circle all Federal and Kansas Support Received)**

1.      My title is Interim Chief Operations Officer of Elkhart Telephone Company, Inc. (Company/Cooperative). In this capacity, I am in a position of authority to direct how federal high-cost Universal Service Fund (USF), including Legacy or Frozen high-cost Loop support (HCL/FHCS), Safety Valve support (SVS), Connect America Cost Model (CACM) support, Connect America Fund (CAF I/CAF II) support, Alternative Connect America Cost Model (A-CAM/ACAM II) support, Rural Broadband Experiment support (RBE), Rural Digital Opportunity Fund (RDOF) support, and/or Kansas Universal Service Fund (KUSF) support received will be used and by this certification I am binding Elkhart Telephone Company, Inc. (Company/Cooperative) to the statements made in this certification.

2.      Elkhart Telephone Company, Inc. (Company/Cooperative) was named as an Eligible Telecommunications Carrier (ETC) by the Kansas Corporation Commission (KCC) for federal support purposes in Docket No. 98-GIMT-241-GIT by order dated December 5, 1997 and KUSF support purposes in Docket No. 98-GIMT-241-GIT by order dated December 5, 1997.

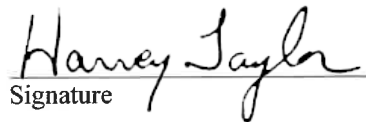
3.      By this affidavit, I certify that all federal high-cost USF, including HCL, FHCS, SVS, CAF I/CAF II, A-CAM/ACAM II, RBE, RDOF, and/or KUSF received by Elkhart Telephone Company, Inc.

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

(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

Harvey Taylor  
Printed/Typed Name

Executed on 06/26/2025 date.

Email address: htaylor@epictouch.com

**Incumbent ETC Investment and Expenses  
Kansas Test for USF Certification**

**25-GIMT-332-GIT  
Attachment 2a**

**Company Name:** *Elkhart Telephone Company, Inc.*

**DATA YEAR:** *2024*

**Incumbent ETC Investment and Expenses  
Kansas Test for USF Certification**

**25-GIMT-332-GIT  
Attachment 2a**

**Company Name:** *Elkhart Telephone Company, Inc.*

**DATA YEAR:** *2024*

**For the Following Lines, Use Gross Additions for Plant and Annual Amounts for  
Expenses for the Test Year**

**Incumbent ETC Investment and Expenses  
Kansas Test for USF Certification**

**25-GIMT-332-GIT  
Attachment 2a**

<p><b>Company Name:</b> <u><i>Elkhart Telephone Company, Inc.</i></u></p>
<p><b>DATA YEAR:</b>     <b>2024</b></p>
<p>Test for use of FUSF &amp; KUSF</p>

**Incumbent ETC Investment and Expenses  
Kansas Test for USF Certification**

**25-GIMT-332-GIT  
Attachment 2a**

**Company Name:** *Elkhart Telephone Company, Inc.*

**DATA YEAR:** *2024*

**Narrative Report for New Investments**ETC Certification for Use of **USF** Support

Provided to the Kansas Corporation Commission

Company Name: Elkhart Telephone Company, Inc.Data Year: 2024

					Amount Used in the USF Supported Areas
Town or Exchange	Description of Improvement	Cash Investment	Allocation %	Notes	
A	B	C	D	E	F= C x D

NOTES:

**This total amount should match the New Investment Subtotal on the USF Certification Form - Attachment 2a LINES (245 & 255). For CETCs, this amount should match the New**

Contact: Harvey TaylorPhone No.: (620) 309-4360Title: COOE-Mail: [htaylor@epictouch.com](mailto:htaylor@epictouch.com)



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)\_\_\_\_. **IF YES, PLEASE COMPLETE THE FOLLOWING:**

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.

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

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 Interim Chief Operations Officer of the Elkhart Telephone Company, 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 Elkhart Telephone Company, Inc. (Company/Cooperative) to the statements made in this certification.

2. By this affidavit, I certify that Elkhart Telephone Company, Inc. (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 06/26/2025 (date).

  
Signature

Harvey Taylor

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 \_\_\_\_\_ 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 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 Interim Chief Operations Officer of the Elkhart Telephone Company, Inc. (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 Elkhart Telephone Company, Inc. (Company/Cooperative) to the statements made in this certification.

2. By this affidavit, I certify that Elkhart Telephone Company, Inc. (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 06/26/2025 (date).

  
Signature

Harvey Taylor  
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
---------------	---------------	--------------------------	-----------------

7. A competitive ETC must certify that it offers a local usage plan comparable to that of 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.

[illegible]

## 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 the  
Company/ Cooperative offers a local usage plan comparable to that of the incumbent. I am binding  
\_\_\_\_\_ (Company/Cooperative) to the statements made in this certification.

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed/Typed Name