20170524091101 Filed Date: 05/24/2017 State Corporation Commission of Kansas

# LAW OFFICES JAMES M. CAPLINGER, CHARTERED 823 S.W. 10<sup>TH</sup> AVE. TOPEKA, KS 66612-1618

JAMES M. CAPLINGER (1929 – 2015) JAMES M. CAPLINGER, JR. COLLEEN R. JAMISON

(785) 232-0495 FAX (785) 232-0724 jrcaplinger@caplinger.net colleen@caplinger.net

May 24, 2017

Lynn M. Retz, Secretary Kansas Corporation Commission 1500 SW Arrowhead Rd Topeka, KS 66604

RE:

2017 CAF/ICC Data Collection and associated certifications

Peoples Telecommunications, LLC Docket No. 17-GIMT-426-GIT

Dear Ms. Retz:

Attached for filing please find Peoples Telecommunications LLC's 2017 CAF/ICC Data Collection and associated certificates, as required by the FCC to be filed with the KCC as "the relevant state commission."

The information contained in the "2017 CAF/ICC Data Collection" pages have been marked as confidential; the company believes that 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. Additionally, we reserve the right to amend the filing as necessary up to and including June 16, 2017, which is the date NECA will file the information with the FCC.

If you have any questions, please don't hesitate to let me know.

Cordially yours,

Colleen R. Jamison

Calleer & Jameson

cc: Kathy Billinger

### TO BE COMPLETED BY THE REPORTING CARRIER.

Certification of Officer as to the Accuracy of the CAF ICC Data Reported						
I certify that I am an officer of the reporting car and, to the best of my knowledge, the informati			ual data reported;			
9						
Name of Reporting Carrier: PEOPL	ES TELECOM LLO					
Kathy Billinger		Billinger,email=Kathy@	Digitally signed by Kathy Billinger DN:cn=Kathy Billinger,email=Kathy@peoplestelecom.net,0=peoples telecom llc,l=LaCygne KS 66040, Date:5/16/2017			
Signature of Authorized Officer:				Date: 5/16/2017		
Printed name of Authorized Officer:	Kathy Billinger					
Title or position of Authorized Officer:	CEO/General Ma	anager				
Telephone number of Authorized Officer:	913-757-2500					
Study Area Code of Reporting Carrier	411814	Filing Due Date for this form (mm/dd/yyyy)	6/16/2017			
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.						

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING DATA ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Data Reported on Behalf of Reporting Carrier								
I certify that (Name of Agent)National Exchange Carriers Association, is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the data provided to the Authorized Agent; and, to the best of my knwoledge, the actual data provided to the Authorized								
Agent is accurate.  Name of Authorized Agent:	National Exchang	e Carriers Asso	ciation, Inc.					
Name of Reporting Carrier:	PEOPLES TELEC	COM LLC						
Signature of Authorized Officer:	Kathy Billinger		Billinger,email=Kathy@people	Digitally signed by Kathy Billinger DN:cn=Kathy Billinger,email=Kathy@peoplestelecom.net,O=peoples telecom llc,l=LaCygne KS 66040, Date:5/16/2017				
Printed name of Authorized Officer:		Kathy Billir	nger					
Title or position of Authorized Officer: CEO/General Manager								
Telephone number of authorized off	icer:	913-757-	2500					
Study Area Code of Reporting Carri	er 4118	14	Filing Due Date for this form (mm/dd/yyyy)	6/16/2017				
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.								

### TO BE COMPLETED BY AN OFFICER OF THE REPORTING CARRIER

# Certification of Officer for Rate-of-Return Carrier Eligibility for CAF/ICC Recovery I certify that I am an officer of the reporting carrier and that, to the best of my knowledge, the reporting carrier on this form certifies that it has complied with Eligible Recovery §51.917(d) and Access Recovery Charge §51.917(e) and is eligible to receive the CAF ICC support requested pursuant to §51.917(f). Name of Reporting Carrier: PEOPLES TELECOM LLC Digitally signed by Kathy Billinger DN:cn=Kathy Kathy Billinger Billinger,email=Kathy@peoplestelecom.net,O=peoples telecom Ilc,I=LaCygne KS 66040, Date:5/16/2017 Signature of Authorized Officer or employee: 5/16/2017 Printed name of Authorized Officer or employee: Kathy Billinger CEO/General Manager Title or position of Authorized Officer or employee: Telephone number of Authorized Officer or employee: 913-757-2500 Filing Due Date for this 411814 6/16/2017 Study Area Code of Reporting Carrier form (mm/dd/yyyy) Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

### TO BE COMPLETED BY AN OFFICER OF THE REPORTING CARRIER

Certification	on of Officer for Rate-o	of-Return Carr	ier Not Seeking Dupl	icative Recovery			
I certify that I am an officer of the reporting carrier and that, to the best of my knowledge, the reporting carrier is not seeking duplicative recovery in the state jurisdiction for any Eligible Recovery subject to the recovery mechanism as per §51.917(d)(vii).							
Name of Reporting Carrier: PEOPLES TELECOM LLC							
	Kathy Billinge	r	Digitally signed by Kathy Billinger DN:cn=Kathy Billinger,email=Kathy@peoplestelecom.net,O=peoples telecom llc,I=LaCygne KS 66040, Date:5/16/2017				
						5/16/2017	
Printed name of Authorized Officer or employee: Kathy Billinger							
Title or position of Authorized Officer or employee: CEO/General Manager							
Telephone number of Authorized Officer or employee: 913-757-2500							
Study Area Code of Reporting Carrier	411814		Oue Date for this nm/dd/yyyy)	6/16/2017			
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.							