



901 S. George Washington Blvd.
Wichita, Kansas 67211
316.260.7000 tel
www.cox.com

August 23, 2016

Ms. Neysa Thomas, Executive Director
Kansas Corporation Commission
1500 SW Arrowhead Road
Topeka, Kansas 66604-4027

Re: Kansas Video Service Authorization – Cox Communications Amended Application

Dear Ms. Thomas:

As required by K.A.R. 82-15-1, attached is an application for an amendment to the Kansas video service authorization (07-CXKC-621-VSA) from Cox Communications Kansas L.L.C.

If you have any questions, I can be reached at 479-717-3747.

Sincerely,

Curt Stamp
Field Vice President Government Affairs
Cox Communications

Attachments

KANSAS CORPORATION COMMISSION
TELECOMMUNICATIONS SECTION

**KANSAS VIDEO SERVICE AUTHORIZATION
AMENDED, TERMINATION OR TRANSFER APPLICATION**

Date: 23 August 2016 Type of Application (Check one): Amended Termination Transfer
Applicant's Name: Cox Communications Kansas, LLC d/b/a: Cox Communications
Address 1: 901 S. George Washington Blvd Phone: 316-260-7442
Address 2: _____
City: Wichita State: KS Zip: 67211
Federal Employer Identification Number (FEIN): 58-2520461
Authorizing Docket: 07-CXKC621-VSA Date: 01/08/2007

For Amended Application:

If applicable as an attachment, identify the municipalities and provide a legal description of the service area footprint(s) to be served using Section, Township and Range references. Include the attached description on a computer disc in ESRI compatible format (.E00, or .shp) with a defined projection file. Each footprint should clearly state the date by which the provider will pass 100% of the encompassed households. Multiple service areas may be included.

For Termination Application:

Effective date of Termination: _____

For Transfer Application:

(A transfer application will require a companion Initial or Amended application from the receiving entity, as appropriate.)

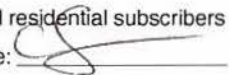
Name: _____ d/b/a: _____
Contact Name: _____ Phone: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____
Federal Employer Identification Number (FEIN): _____
Successor's Authorizing VSA docket: _____ Date: _____

Successor's serving area footprint changes? Yes No

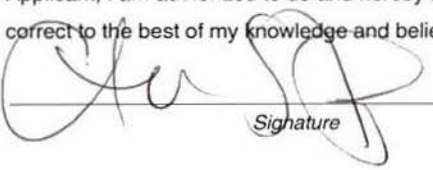
If yes, the successor's VSA authorization must be amended detailing the changed footprint.

Effective date of Transfer: _____

For All Applications:

By submitting this application, the applicant agrees that it may not deny access to service to any group of potential residential subscribers because of the income of the residents in the local area in which such group resides. Initial indicating concurrence: 

I, CURT STAMP, of lawful age, and being first duly sworn, now state: As an officer of the Applicant, I am authorized to do and hereby make the above commitments. I further affirm that all statements made above are true and correct to the best of my knowledge and belief.

 Signature _____
Field Vice President, Government Affairs _____
Title

Barton County

T18S R13W S4, S5, S6, S16, S17, S20, S21, S28, S29, S32, S33

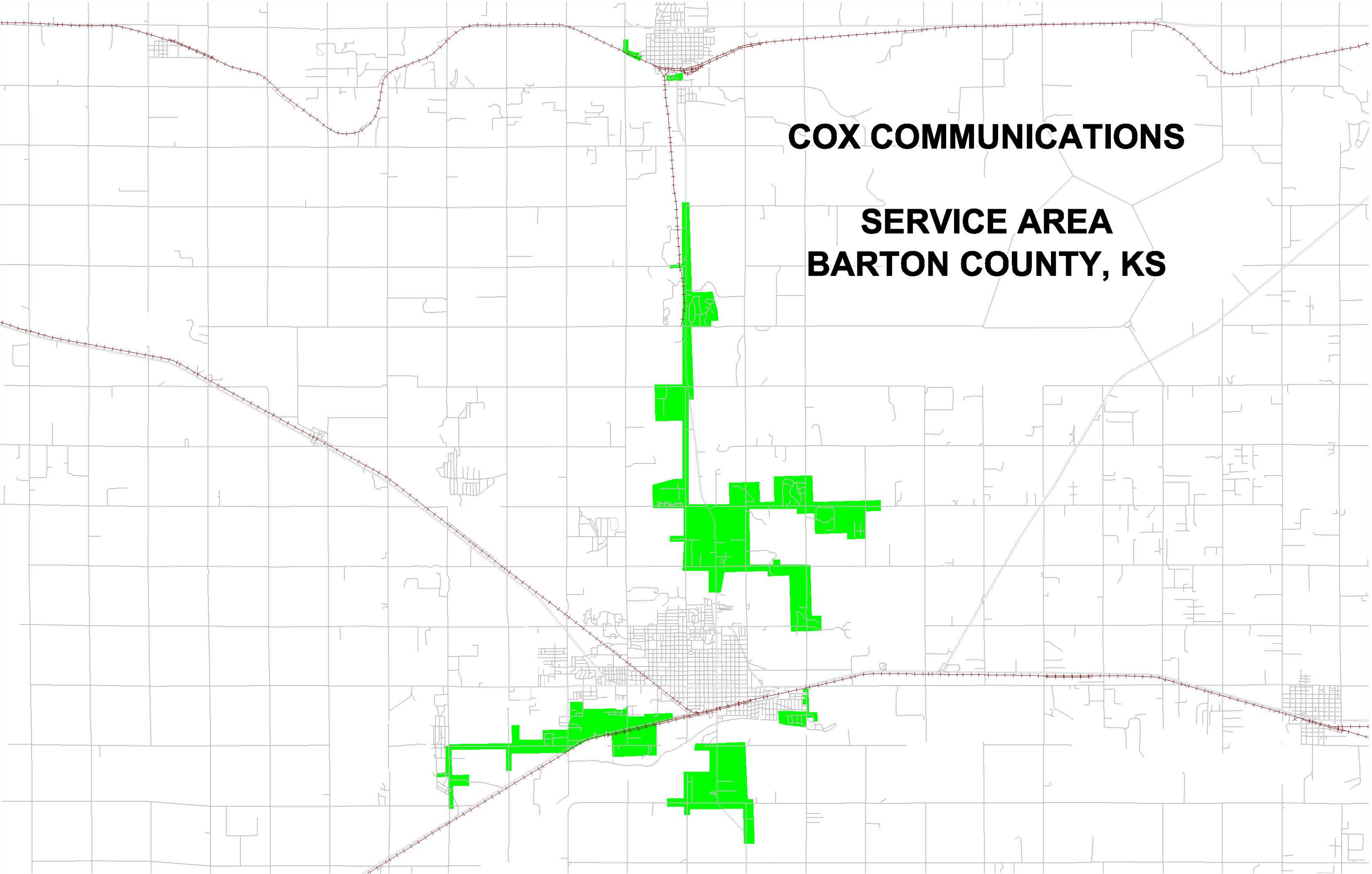
T19S R13W S4, S5, S8, S9, S10, S11, S12, S13, S14, S15, S16,
S17, S20, S21, S22, S23, S26, S27, S31, S32, S34, S35

T20S R13W S4, S5, S6, S9, S10

T20S R14W S1, S2

COX COMMUNICATIONS

**SERVICE AREA
BARTON COUNTY, KS**



Attachment 1

Date of Filing FCC Cable Community Registration Form 322 and CUID number.

Barton County

KS

KS0173

06/07/1978