

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)

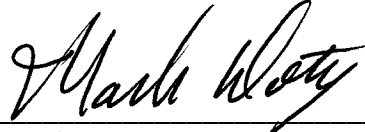
HOME TELEPHONE COMPANY, INC.
ELIGIBLE TELECOMMUNICATIONS CARRIER
CERTIFICATION AND INFORMATION

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

Home 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,

A handwritten signature in black ink, appearing to read "Mark Doty". The signature is written in a cursive, flowing style. It is positioned above a horizontal line that serves as a separator between the signature and the printed text below.

Mark Doty #14526

GLEASON & DOTY, CHARTERED

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Attorney for Home 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

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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 Customer Account & Billing Manager/Secretary of Home Telephone Company (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, Enhanced Alternative Connect America Cost Model (Enhanced ACAM), 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 Home Telephone Company (Company/Cooperative) to the statements made in this certification.

2. Home Telephone Company (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, Enhanced ACAM, RBE, RDOF, and/or KUSF received by Home Telephone Company (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.)

Tina Anderson

Signature

Tina Anderson

Printed/Typed Name

Executed on 6/18/2025 date.

Email address: tanderson@hci-ks.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) 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
N/A					

(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.

zero

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 Customer Account & Billing Manager/Secretary of the Home Telephone Company. 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 Home Telephone Company to the statements made in this certification.

2. By this affidavit, I certify that Home Telephone Company 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 June 18, 2025 (date).

Tina Anderson

Signature

Tina Anderson

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 Customer Account & Billing Manager/Secretary of the Home Telephone Company. 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 Home Telephone Company to the statements made in this certification.

2. By this affidavit, I certify that Home Telephone Company 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 June 18, 2025 (date).



Signature

Tina Anderson

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
McPherson Sentinel	Newspaper	MPCO, RICO, SACO	All Year
Ellsworth Co Independent	Newspaper	EWCO, RICO	All Year
Salina Journal	Newspaper	MPCO, RICO, SACO, EWCO	All Year
Hillsboro Free Press	Newspaper	MPCO, MNCO	All Year
KNGL/KBBE	Radio	MPCO	All Year
Ad Astra Per Aspera	Radio	MPCO, RICO, SACO, EWCO	All Year
The Santa Fe Way	Newspaper	MPCO	All Year
The Spotlight	Newspaper	SACO	All Year
HCI website, Facebook	social internet media	MPCO, RICO, SACO, MNCO, DKCO, EWCO	All Year
Twitter, Instagram	social internet media	MPCO, RICO, SACO, MNCO, DKCO, EWCO	All Year

(If necessary, please attach additional pages.)

MPCO=McPherson County
RICO=Rice County
EWCO=Ellsworth County
SACO=Saline County
MNCO=Marion County
DKCO=Dickinson County

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.

N/A

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