20180629101029 Filed Date: 06/29/2018 State Corporation Commission of Kansas

LAW OFFICES JAMES M. CAPLINGER, CHARTERED 823 S.W. 10TH AVE. TOPEKA, KS 66612-1618

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

(785) 232-0495 Fax (785) 232-0724 <u>jrcaplinger@caplinger.net</u> colleen@caplinger.net

June 28, 2018

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

RE:

Docket 18-GIMT-394-GIT

Section 254(e) certifications

Calleer & Jemison

Dear Ms. Retz:

On behalf of Madison Telephone, LLC, attached please find for filing in Docket No. 18-GIMT-394-GIT the 254(e) certifications required by the Commission to be filed in this docket by July 2, 2018.

In this filing, Attachment 2a, lines 240, 245, and 255 as well as the entirety of Attachment 4 has been marked as confidential; this information is confidential commercial information and, as such, 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. As always, if you have any questions, please do not hesitate to contact me.

Cordially yours,

Colleen R. Jamison

cc:

Shana Rains

Encl.

THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

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Before	Omt	nice	cioner	c.

Chair Shari Feist Albrecht

Commissioner Jay Scott Emler Commissioner Pat Apple

In the Matter of Certification of Compliance)		
with Section 254(e) of the Federal)		
Telecommunications Act of 1996 and)	Docket No.	18-GIMT-394-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 appropriate support received)

- 1. My title is President of Madison Telephone, LLC. In this capacity, I am in a position of authority to direct how federal high-cost Universal Service Fund (USF), Connect America Fund (CAF) support, and/or Kansas Universal Service Fund (KUSF) support received will be used and by this certification I am binding Madison Telephone, LLC to the statements made in this certification.
- 2. Madison Telephone, LLC was named as an eligible telecommunications carrier 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 the USF, CAF and/or KUSF received by Madison Telephone, LLC was used in the proceeding calendar year **2017** and will be used in the new calendar year **2019** *only* for the provision, maintenance, and upgrading of facilities and services for which the support is intended, consistent with Section 254(e) of the Telecommunications Act, and/or Kansas statutes and KCC requirements.

Attachment 1

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

Diantha C. Stutesman Printed/Typed Name

Executed on July 2, 2018

Email address: mtn.diantha@gmail.com

Company Name:	Madison Te	lephone, LLC.	
	DATA YEAR:	2017	
	LINE	REGULATED AMOUNT	
WORKING LOOPS 1. Total Loops 2. Category 1.3 Loops	(060) (070)		
INVESTMENT			
Plant Accounts a. Acct 2001	(160)	\$ 5,534,521	
 2. Selected Plant Accounts a. Acct 2210 b. Acct 2220 c. Acct 2230 d. Total Central Office Equip e. Circuit Equip Cat 4.13 f. Acct 2410 	(230) (235) (240) (245) (250) (255)		
AMORTIZABLE TANGIBLE ASSETS Acct. 2680 Tot Assets Acct. 2680 (2230) COE Trans Acct. 2680 (Cat. 4.13) COE Trans Acct. 2680 (2410) Total CWF Acct. 2680 (2410) CWF-Cat 1 Acct. 6560 (2680) Dep & Amort	(800) (805) (810) (815) (820) (830)	0 0 0 0 0	
PART 36 - COST STUDY DATA 1. Cost Study Avg C&WF Acct 2410 2. Cost Study Avg C&WF Cat 1	(700) (710)	4,059,386 3,910,068	
 C&WF CAT 1 Factor COE CAT 4.13 Factor Switching Factor 		0.963217 0.569104 1.000000	

Company Name: Madison Telephone, LLC.

DATA YEAR: 2017

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

INVESTMENT, EXPENSE AND TAXES	LINE	REGULATED AMOUNT	
Selected Plant Accounts Acct 2330	(240)	The second second	
a. Acct 2230	(240) (245)		
b. Total Central Office Equip	(243)		
c. Acct 2410 (Total)	(255)	100	
2. Expenses - Plant Specific Exp	(225)	4.075	
a. Acct 6110	(335)	1,275	
b. Acct 6110 (benefits) c. Acct 6110 (rents)	(340) (345)	0	
d. Acct 6120	(350)	53,498	
e. Acct 6120 (benefits)	(355)	13,475	
f. Acct 6120 (rents)	(360)	0	
g. Acct 6210	(365)	40,318	
h. Acct 6210 (benefits)	(370)	2,860	
i. Acct 6210 (rents)	(375)	0	
j. Acct 6220	(380)	0	
k. Acct 6220 (benefits)	(385)	0	
I. Acct 6220 (rents)	(390)	0	
m. Acct 6230	(395)	111,379	
n. Acct 6230 (benefits)	(400)	21,847	
o. Acct 6230 (rents)	(405)	0	
p. (sum of lines 365+380+395)	(410)	151,697	
q. Acct 6410	(430)	125,158	
r. Acct 6410 (benefits)	(435)	31,360	
s. Acct 6410 (rents)	(440)	0	
t. Total Expenses Accts. 6110 - 6410	(445)	\$ 331,628	
3. Expenses - Plant Non Specific Exp	(450)	00.055	
a. Acct 6530	(450)	88,855	
b. Acct 6530 (benefits)	(455)	11,775	
 Depreciation & Amortization Exp a. Acct 6560 (#2210) 	(510)	0	
b. Acct 6560 (#2220)	(515)	0	
c. Acct 6560 (#2230)	(520)	37,520	
d. Acct 6560 (#2210-2230)	(525)		
e. Acct 6560 (#2410)	(530)	227,658	
5. Corporate Operating Expenses			
a. Acct 6710	(535)	66,940	
b. Acct 6710 (benefits)	(540)	16,459	
c. Acct 6720	(550)	377,569	
d. Acct 6720 (benefits)	(555)	85,888	
e.Total Corporate Operating Expense (line 535+550)) (565)	\$ 444,509	
6. Other Expenses and Revenues	/===		
a. Benefits Portion	(600)	230,147	
b. Rents Portion	(610)	0	
Sum of All Expenses (Excluding Depreciation) 7. Taxes		\$ 864,992	
a. Acct 7200	(650)	165,521	



Company Name: Madison Telephone, LLC.				
	DATA YEAR:	2017		
Test for use of FUSF & KUSF				
CAPITAL: 1. Category 1 C&WF		43,499		
2. Category 4.13 COE and Switching		3,688		
MAINTENANCE: 3. CWF - MAINT. EXP.		90,348		
4. COE - MAINT. SW		37,458		
5. COE - MAINT-OP SYSTEM		-		
6. COE - MAINT TRANS.		66,609		
7. CWF - NETWORK SUPPORT 8. COE - NETWORK SUPPORT		901 132		
9. CWF GENERAL SUPPORT 10. COE GENERAL SUPPORT		28,276 4,141		
20. CWF NETWORK OPERATION 21. COE NETWORK OPERATION		54,456 7,975		
22. CWF EXEC. & PLANNING 23. COE EXEC. & PLANNING		35,664 5,223		
24. CWF GENERAL ADMIN. 25. COE GENERAL ADMIN.		206,069 30,179		
26. CWF OPERATING TAXES 27. COE OPERATING TAXES		116,939 17,126		
28. CWF BENEFITS - TTL OPER EXP 29. COE BENEFITS - TTL OPER EXP		162,596 23,813		
30. CWF RENTS - TTL OPER EXP 31. COE RENTS - TTL OPER EXP		0 0		

Railsas Test for OSI Gertification						
Company Name: <i>Madison Telephone, LLC.</i>						
	DATA YEAR: 2017					
A. Total Cash Expenditures Associated with USF	935,091					
B. Certified Federal USF Receipts: B1. High Cost Loop Support / Frozen High Cost Support B2. Safety Net Support B3. Broadband Loop Support B4. Safety Valve Support for acquired Exch. B5. Connect America Cost Model B6. Alternative Connect America Model B7. CAF ICC (§§ 51.915, 51.917, 51.304) B8. Total Certified Federal USF Receipts	544,717 15,279 0 0 0 0 0 57,948 \$ 617,944					
C. KUSF Receipts	225,256					
D. Total FUSF and KUSF Receipts	843,200					
E. Do Expenditures Exceed FUSF Receipts? Amount Expenditures Exceed Certified FUSF (negative number means FUSF exceeds Expenditures) F. Do Expenditures Exceed FUSF & KUSF Receipts? Amount Expenditures Exceed Certified FUSF and/or KUS (negative number means FUSF/KUSF exceeds Expenditures)						
Please provide the following information:						
Contact:	Daniel Meszler					
Title:	Senior Regulatory Consultant					
Phone No.:	719-266-4334					
E-Mail:	dmeszler@tcatel.com					

Narrative Report for New Investments

Company Name: Madison Telephone, LLC

Data Year: 2017

ETC Certification for Use of **USF** Support Provided to the Kansas Corporation Commission

							Amount Used
							in the USF
				Cash	Allocation		Supported
Town or Excha	ange	Description o	f Improvement	Investment	%	Notes	Areas
Α			В	С	D	Е	F= C x D
							*
			1				
			1				
			1				
Subtotal							
Total							- Andrews
NOTES:							
			This total amo	unt chould m	atch the No	w Invocto	nont
			Subtotal on th	e USF Certific	ation Form	- Attachm	ient 2a LINES
			(245 & 255).				
	Contact:	Shana Rains		Phone No.:	620-437-235	6	
		Accountant		•	mtn.shana@		

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Narrative Report for New Investments

ETC Certification for Use of **USF** Support Provided to the Kansas Corporation Commission

Carrier Name:	Madison Telephone, LLC	Supplementa
Data Year:	2017	Pages

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

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18-GIMT-394-GIT Attachment 4

Subtotal

6/28/2018 Page 3

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

17	CFR	4 5	(P)	1
7/	CIL	7.0	·	

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
None exceeding 30 minutes during 2017					

(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.

None

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

See Quality of Service Reports filed quarterly with KCC

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 <u>WIRELINE</u> ANNUAL CERTIFICATION KCC Docket Reference: 06-GIMT-446-GIT

(Please type or print legibly)

- 1. My title is President of the Madison Telephone, LLC. 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 Madison Telephone, LLC to the statements made in this certification.
- 2. By this affidavit, I certify that Madison Telephone, LLC 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 July 2, 2018.

Signature

Diantha C. Stutesman

Printed/Typed Name

QUALITY OF SERVICE <u>WIRELESS</u> ANNUAL CERTIFICATION KCC Docket Reference: 06-GIMT-446-GIT (Please type or print legibly)

1.	My ti	tle is		0	f the	-		
(Company/	Cooperative	e). In this cap	pacity, I am in a	a position	of autho	ority to cert	ify whe	ther the
Company/ C	Cooperative	is complying	with required	quality of	service	standards.	I am	binding
		_(Company/Co	operative) to the	statements	made in	this certific	cation.	
2.	By this	affidavit, I ce	ertify that			_(Company/	Cooper	ative) is
in compliand	ce with the (CTIA Code.						
I ce	ertify under	penalty of perj	ury under the la	ws of the s	tate of l	Kansas that	the fore	going is
true and con	rect. (Pursu	ant to Kan. Sta	t. Ann. 53-601.)	Executed of	on		((date).
				Signat	ure			_
				Print /	Typed	l 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 President of the Madison Telephone, LLC. 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 Madison Telephone, LLC to the statements made in this certification.
- By this affidavit, I certify that Madison Telephone, LLC 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 July 2, 2018.

Signature

Diantha C. Stutesman

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
Emporia Gazette	Newspaper	Greenwood, Lyon & Coffey Counties	Jan, Feb, Jul, Sep
KVOE	Radio	Greenwood, Lyon & Coffey Counties	Jan-Mar, Jun- Aug, Oct-Dec
Madison News	Newspaper	Greenwood, Lyon & Coffey Counties	Jan-Dec
Flint Hill Shopper	Newspaper	Greenwood, Lyon & Coffey Counties	Feb, Jul
Eureka Herald	Newspaper	Greenwood County	Feb
Madison Lions Club	Calendar Advertising	Greenwood, Lyon & Coffey Counties	Jul
96.1 The Wave	Radio	Greenwood, Lyon & Coffey Counties	Mar, May, Oct
Olpe Lions Club	Calendar Advertising	Greenwood, Lyon & Coffey Counties	Apr
KanOkla Networks	Website	Worldwide	Jan-Dec
Coffey County Republica	n Newspaper	Greenwood, Lyon & Coffey Counties	Jan-Jun, Sep-Dec

(If necessary, please attach additional pages	.)			
	•			
7. A competitive ETC must certify that it off the incumbent. Please provide a description to that of the incumbent and complete the certification.	of the local usage plan(s) the			
	PLAN ANNUAL CERTIFIC ce: 06-GIMT-446-GIT r print legibly)	CATION		
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 pla	an comparable to that of the	incumbent. I am		
binding(Company	//Cooperative) to the statem	ents made in this		
certification.				
2. By this affidavit, I certify that		(Company/		
Cooperative) offers a local usage plan comparable	e to that of the incumbent.			
I certify under penalty of perjury under	the laws of the state of Kansa	s that the foregoing		
is true and correct. (Pursuant to K	an. Stat. Ann. 53-601.)	Executed on		
(date).				
	•			
	Signature			
	Printed/Typed Name			