20170525095850 Filed Date: 05/25/2017 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 jrcaplinger@caplinger.net colleen@caplinger.net

May 25, 2017

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

RE:

2017 CAF/ICC Data Collection and associated certifications

South Central Telephone Association, Inc.

Docket No. 17-GIMT-426-GIT

Dear Ms. Retz:

Attached for filing please find South Central Telephone Association, Inc'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

Colleen & Jamison

cc: Kelly Johnson

TO BE COMPLETED BY THE REPORTING CARRIER.

Сег	tification of Officer as	to the Accuracy of the CAF ICC Data	Reported		
I certify that I am an officer of the reporting ca and, to the best of my knowledge, the informa			al data reported;		
Name of Reporting Carrier: S. CEI	NTRAL TEL - KS	Digitally signed by Kelly	Johnson DN:rn≂Kelly		
Kelly Signature of Authorized Officer:	y Johnson	Johnson,email=kjohnson@sctelcom.com,O=s. central tel - ks.l= , Date:5/24/2017			5/24/2017
Printed name of Authorized Officer:	Kelly Johnson				
Title or position of Authorized Officer:	CEO				
Telephone number of Authorized Officer:	620-930-1020				
Study Area Code of Reporting Carrier	411831	Filing Due Date for this form (mm/dd/yyyy)	6/16/2017		
		n can be punished by fine or forfeiture und		934,	

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, Inc. I certify that (Name of Agent) size 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 Exchange	Carriers Asso	ociation, Inc.				
Name of Reporting Carrier:	S. CENTRAL TEL -	· KS					
Signature of Authorized Officer:	Kelly Johnson			Digitally signed by Kelly Johnson DN:cn=Kelly Johnson,email=kjohnson@sclelcom.com,O=s, central tel - ks.l= , Date:5/24/2017			
Printed name of Authorized Officer	:	Kelly Johr	nson				
Title or position of Authorized Offic	er:	CEO					
Telephone number of authorized officer: 620-930-1020							
Study Area Code of Reporting Car	rier 41183	1	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: S. CEN	TRAL TEL - KS	6						
	Kelly Jo	Digitally signed by Kelly Johnson DN:cn=Kelly Kelly Johnson Johnson,email=kjohnson@sctelcom.com,O=s. central tel-						
ks,l= ,Date:5/24/2017 Signature of Authorized Officer or employee: Date: 5						5/24/2017		
Printed name of Authorized Officer or employee: Kelly Johnson								
Title or position of Authorized Officer or employee: CEO								
Telephone number of Authorized Officer or employee: 620-930-1020								
Study Area Code of Reporting Carrier	411831		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 Not Seeking Duplicative 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: S. CENTRAL TEL - KS								
	Kelly Johnson			Digitally signed by Kelly Johnson DN:cn=Kelly Johnson,email=kjohnson@sctelcom.com,O=s. central tel -				
ks,l= ,Date:5/24/2017 Signature of Authorized Officer or employee:					Date:	5/24/2017		
Printed name of Authorized Officer or employee: Kelly Johnson								
Title or position of Authorized Officer or employee: CEO								
Telephone number of Authorized Officer or employee: 620-930-1020								
Study Area Code of Reporting Carrier	411831		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.								