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October 2, 2018

Paula Artzer
Senior Telecommunications Analyst
Kansas Corporation Commission
1500 SW Arrowhead Rd
Topeka, KS 66604

RE: S&T Communications, LLC
Video Service Authorization Application
19-S&CT-099-VSA

Dear Ms. Artzer:

Attached for supplementing S&T Communications, LLC's application for video service authorization please find the FCC CUID for KS0715 in Thomas County. This FCC CUID was approved on October 9, 2001. Also attached please find a legal description for this area.

As I believe this area was previously reflected in the mapping files provided earlier, this should be everything needed by you to process the application. We appreciate your understanding through this process and, as always, should you need anything further please do not hesitate to contact me.

Cordially yours,


Colleen R. Jamison

cc: Walker Hendrix
Christina Hickert

Att – 2pp



FEDERAL COMMUNICATIONS COMMISSION
WASHINGTON, DC 20554

CABLE COMMUNITY REGISTRATION
FCC Form 322

Approval Date: October 9, 2001

KS0715

1. Indicate the name, mailing address, and telephone number of the cable system operator.

Legal Name S&T COMMUNICATIONS LLC		FCC Registration No. (FRN) 0008460081	
Assumed/ doing business as (dba) name			
Mailing Address 320 KANSAS AVENUE P.O. Box 99		City BREWSTER	State KS
Telephone No. ()		Zip Code 67732	
		Email (optional)	

2. Indicate whether the operator is an individual, private association, partnership, corporation, or government entity.

<input type="checkbox"/> Individual	<input type="checkbox"/> Association	<input checked="" type="checkbox"/> Partnership	<input type="checkbox"/> Corporation
<input type="checkbox"/> Government Entity	<input type="checkbox"/> Limited Liability Corp.	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Other

3. Indicate the name, telephone number, and e-mail address (if any) of the person responsible for questions regarding this form.

Name of Contact	Telephone No. ()	E-mail Address
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4. Indicate the Physical System Identifier (PSID) if the community will be served by an existing system 002739

5. Provide a date (MM/YYYY) when this community began service. 01/1984

6. Indicate the community name, county, state, and type code of the community from the list provided in the instructions.

Name of Community THOMAS	County THOMAS	State KS	Type Code 1
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7. Indicate the local television broadcast signals (i.e. call signs) to be carried on this system.

KLBY	KSNG	WGN	KBSL	K15CG				

8. Certification

By signing below, the operator also certifies that neither the operator nor any other "party" to the notification is subject to a denial of federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862. For the definition of a "party" for this purpose, see 47 C.F.R. § 1.2002(b).

Type or Print Name	Title
Signature	Date

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. § 1001) AND/OR REVOCATION OF ANY STATION LICENSE (47 U.S.C. § 312 (a) (1)), AND/OR FORFEITURE (47 U.S.C. § 503).

Beginning at a point at the northeast corner of Section 5, T8S, R34W, Thomas County, Kansas; thence North 87°51'22" West, 2,645.22 feet; thence South 2°08'38" West, 2,661.02 feet; thence South 87°30'11" East, 2,624.66 feet; thence North 2°35'07" East, 2,677.26 feet to the point of beginning.