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 COMMUNICATIONS, INC. ELIGIBLE TELECOMMUNICATIONS CARRIER CERTIFICATION AND INFORMATION

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

Home Communications, 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,

Mark Doty #14526

GLEASON & DOTY, CHARTERED

401 S. Main, Suite 102

Ottawa, KS 66067

(785) 242-3775

Attorney for Home Communications, Inc.

THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

I	Andrew J. French, C Dwight D. Keen, Co Annie Kuether, Cor	ommissioner	
In the Matter of Certification of C with Section 254(e) of the Federa	1)		
Telecommunications Act of 1996	and)	Docket No.	25-GIMT-332-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 Federal and Kansas Support Received)

- 1. My title is Customer Account & Billing Manager/Secretary of Home Communications, Inc. 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 Communications, Inc. (Company/Cooperative) to the statements made in this certification.
- 2. Home Communications, Inc. (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.

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Docket No. 25-GIMT-332-GIT Attachment 1

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 Communications, Inc. (Company/Cooperative) was used in the proceeding calendar year <u>2024</u> and will be used in the new calendar year <u>2026</u> *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.)

Jina Anderson

Signature

Tina Anderson

Printed/Typed Name

Executed on June 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:

(1 cs/110)-11	11 1123, 1	LEASE CO		THE FOLL	JWING.
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 <u>WIRELINE</u> 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 Communications, Inc. 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 Communications, Inc to the statements made in this certification.
- 2. By this affidavit, I certify that Home Communications, Inc 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).

Juna Anderson	
Signature	
<u>Tina Anderson</u>	
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 title is		of tl	1e			(C	ompany/
Cooperative).	In this capaci	ty, I am in a po	osition of aut	hority to	certify whe	ther t	he C	ompany/
Cooperative	is complying	with required	quality of	service	standards.	I	am	binding
	(Com	pany/Cooperativ	e) to the state	ments ma	de in this cer	tificat	ion.	
2.	By this affida	vit, I certify that			(Company	// Coo	perat	ive) is in
compliance w	rith the CTIA Co	de.						
I cert	ify under penalty	of perjury under	the laws of th	e state of	Kansas that t	the for	regoir	ng is true
and correct. (Pursuant to Kan.	Stat. Ann. 53-60	1.) Executed	on			_(date	e).
			S	Signature				
			F	Print / Tv	ped 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 Communications, Inc. 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 Communications, Inc to the statements made in this certification.
- 2. By this affidavit, I certify that Home Communications, Inc 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

<u>Tina Anderson</u>

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, EV	VCO All Year
Twitter, Instagram	social internet media	MPCO, RICO, SACO, MNCO, DKCO, EV	VCO All Year

(If necessary, please attach additional pages.)

7. A competitive ETC must certify that it of	fers a local usage plan comparable to that of
the incumbent LEC. Please provide a descri	ption of the local usage plan(s) that is
comparable to that of the incumbent LEC an	d complete the certification.
N/A	
KCC Docket Referen	PLAN ANNUAL CERTIFICATION ace: 06-GIMT-446-GIT or print legibly)
1. My title is	of the
(Company/ Cooperative). In this capacity, I an	n 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/Cooper	rative) to the statements made in this certification.
2. By this affidavit, I certify that	(Company
Cooperative) offers a local usage plan comparab	le 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 B	Kan. Stat. Ann. 53-601.) Executed on
(date).	
	Signature
	Printed/Typed Name