Lance J.M. Steinhart, P.C.

Attorneys At Law 1725 Windward Concourse Suite 150 Alpharetta, Georgia 30005

Also Admitted in New York Email: lsteinhart@telecomcounsel.com Telephone: (770) 232-9200 Facsimile: (770) 232-9208

September 16, 2016

VIA ELECTRONIC & OVERNIGHT DELIVERY

Executive Director Kentucky Public Service Commission 211 Sower Blvd. Frankfort, KY 40602

> Re: Case No. 2016-00059 – *An Inquiry into the State Universal Fund* Responses of SelecTel, Inc. d/b/a SelecTel Wireless

Dear Sir/Madam:

SelecTel, Inc. d/b/a SelecTel Wireless hereby responds to Staff's First and Second Request for Information to All Parties of Record.

An electronic version of this filing was uploaded to the Public Service Commission's Electronic Filing System on this day. Pursuant to 807 KAR 5:001 Section 8(5)(a), I certify the electronic version is a true and accurate copy of the paper medium. I further certify that I am the authorized agent for the entity filing this Response and possess the facilities to receive electronic transmissions.

I have enclosed an extra copy of this cover letter to be date stamped and returned to me in the enclosed self-addressed postage prepaid envelope. If you have any questions or if I may provide you with additional information, please do not hesitate to contact me. Thank you.

Respectfully submitted,

s/ Lance J.M. Steinhart

Lance J.M. Steinhart Managing Attorney Lance J.M. Steinhart, P.C.

COMMONWEALTH OF KENTUCKY

BEFORE THE PUBLIC SERVICE COMMISSION

)

)

IN THE MATTER OF:

AN INQUIRY INTO THE STATE UNIVERSAL SERVICE FUND

CASE NO. 2016-00059

SELECTEL, INC. D/B/A SELECTEL WIRELESS' RESPONSES TO COMMISSION STAFF'S FIRST AND SECOND REQUESTS FOR INFORMATION TO ALL PARTIES OF RECORD

SelecTel, Inc. d/b/a SelecTel Wireless ("SelecTel" or the "Company") hereby submits its responses to the Kentucky Public Service Commission ("Commission") Staff's First and Second Requests for Information to All Parties of Record dated April 6, 2016 and June 22, 2016.

CERTIFICATION

I, Matt O'Flaherty, first being duly sworn, depose and state that I am the President of SelecTel, Inc. d/b/a SelecTel Wireless, and do hereby declare under oath that the foregoing responses are true and accurate to the best of my knowledge, information, and belief formed after a reasonable inquiry.

Executed on <u>9/16/2016</u> <u>Matt O'Flaherty, President</u> SelecTel, Inc. d/b/a SelecTel Wireless

<u>CERTIFICATE OF SERVICE</u>

In accordance with 807 KAR 5:001, Section 8, I certify that the September 16, 2016 electronic filing of these Data Responses is a true and accurate copy of the same document being filed in paper medium; that the electronic filing was transmitted to the Commission on September 16, 2016; that there are currently no parties that the Commission has excused from participation by electronic means in this proceeding; and that an original paper medium of these Data Responses will be mailed to the Commission by first class United States mail, postage prepaid, on September 16, 2016.

s/ Lance J.M. Steinhart

Lance J.M. Steinhart

REQUEST NO. 1

Provide the KUSF reimbursement forms submitted to the Commission and the Department of Finance and Administration from January 2014 to present.

Response: SelecTel started providing wireless services in May, 2014. Please find forms filed since, May 2014, attached as Exhibit A.

REQUEST NO. 2

Explain how the total number of subscriber lines is calculated for the KUSF reimbursement form when a new customer receives service in the middle of a month.

Response: The total number of subscriber lines reported on the KUSF reimbursement form is calculated using the number of customers on the last day of each month.

REQUEST NO. 3

Explain how the total number of subscriber lines is calculated for the KUSF reimbursement form when a customer leaves in the middle of a month.

Response: Please see Response to Request No. 2, above.

REQUEST NO. 4

Explain how the KUSF surcharge remittance is calculated when you experience a bad debt. Explain whether none of the surcharge amount or the full surcharge amount billed to, but not paid by, the customer is remitted.

Response: The KUSF surcharge is billed to the customer on the last day of each month and remitted the following month. A bad debt does not affect SelecTel's KUSF reporting.

REQUEST NO. 5

State whether you believe the commission should wait until the FCC's investigation of Lifeline Reform is concluded before rendering a decision in this proceeding, and explain the basis for your response.

Response: SelecTel believes that the Commission should wait until the FCC's investigation of Lifeline Reform is concluded before rendering a decision in the proceeding because the FCC may make additional reforms that may affect how the Commission resolves to administer the KUSF. Waiting to ensure the KUSF reforms coincide with the reforms to the federal Lifeline program could avoid the Commission having to modify the KUSF after the Lifeline Reform is concluded.

SelecTel, Inc. d/b/a SelecTel Wireless Responses to First and Second Requests for Information

Responses to Staff's First Request for Information to All Parties

REQUEST NO. 6

State how soon upon the issuance of an Order by the Commission changing the KUSF surcharge that you are or anticipate being able to implement the changes on customer bills. If it differs by type of account, provide the information for each type of account, along with the number of access lines for each account type.

Response: SelecTel anticipates it could implement the changes on customer bills within sixty (60) days, if/when necessary.

REQUEST NO.1

If not already provided in a previous response to a Commission Staff request for information, respond to the following:

Response: The Company previously provided responses to Request No. 1 (a-d) in its Responses to Staff's First Request for Information to All Parties. Additional or supplemental responses, if any, are provided below.

- a) Provide the monthly Kentucky Universal Service Fund ("KUSF") forms¹ ("KUSF form") submitted to the Commission and the Department of Finance and Administration from January 2014 to the present.
- b) Explain how the total number of subscriber lines is calculated for the KUSF form when a new customer receives service in the middle of a month.
 Response: Please see Response No. 2 to Staff's First Request for Information to All Parties.
- c) Explain how the total number of subscriber lines is calculated for the KUSF form when a customer leaves in the middle of a month.
 Response: Please see Response No. 3 to Staff's First Request for Information to All Parties.
- d) Explain how the KUSF surcharge remittance is calculated when you experience a bad debt. Explain whether none of the surcharge amount or the full surcharge amount billed to, but not paid by, the customer is remitted.
 Please see Response No. 4 to Staff's First Request for Information to All

Please see Response No. 4 to Staff's First Request for Information to All Parties.

e) State whether the KUSF surcharge billed to a customer is prorated if the customer has service for less than a full month.

Response: If a customer has services for less than a month SelecTel would not prorate the KUSF surcharge billed to the customer.

¹ Commission Staff's First Request for Information referred to these forms as "reimbursement" forms. In this request, Commission Staff is referring to the forms that the parties are to file monthly pursuant to the Commission's decision in *An Inquiry into Universal Service Funding Issues*, Administrative Case No. 360 (KY. PSC May, 22, 1998) (form last revised March 10, 2016). These forms are to be filed regardless of whether a party is seeking reimbursement from the KUSF.

REQUEST NO. 2

If no KUSF forms have been submitted to the Commission and the Kentucky Department of Finance and Administration from January 2014, to the present, explain why the KUSF forms have not been submitted.

- a) If no KUSF forms have been submitted, state whether you collect the KUSF surcharge from your customers.
- b) If you do not collect the KUSF surcharge from your customers, explain why the KUSF surcharge has not been collected.
- c) If no KUSF forms have been submitted, state whether you remit the KUSF surcharge to the Kentucky Department of Finance and Administration.
- d) If you do not remit the KUSF surcharge to the Kentucky Department of Finance and Administration, explain why the KUSF surcharge has not been remitted.

Response: Not applicable; the Company has been submitting KUSF forms and remitting the KUSF surcharge to the Kentucky Department of Finance and Administration.

REQUEST NO. 3

Explain the anticipated impact, if any, that the FCC's recent *Lifeline Reform Order*² will have on the provision of Lifeline service in Kentucky, including, but not limited to, verifying eligibility of Lifeline customers; the potential provision of broadband service; and, the impact of the reduction of Federal Universal Service funding for voice service.

Response: Per the 2016 Lifeline Reform Order, eligibility for Lifeline will be determined by the National Lifeline Eligibility Verifier ("National Verifier") rather than the ETC—the impact of which is yet to be determined. While the National Verifier has the potential to reduce administrative cost burdens on ETCs, it is unclear whether or not the National Verifier will include an option for real-time verifications, which is an essential business practice for many ETCs, and whether or not ETCs will be given explicit safe harbors from enforcement action for enrollments that are processed through the National Verifier. Because there would be no retention of proof documentation by which the ETC could defend an enrollment, the lack of safe harbor for enrollments approved by the National Verifier would expose ETCs to the risk of undue enforcement action.

The Lifeline Reform Order's aim to drive the adoption of broadband among lowincome Americans is in itself a positive step forward. It is the correlating reduction in funding for voice service that may likely have a negative effect on Lifeline subscribership. The Lifeline Reform Order, in attempts to increase broadband access, seems to underestimate the tremendous value that voice service has for lowincome Americans. Likewise, by requiring a minimum service standard equal to the average household usage, the Lifeline Reform Order undermines the safety net of affordability, effectively "pricing-out" many Lifeline consumers who simply cannot afford the theoretical average usage of most Americans, even at discounted prices. These customers, who either do not need or cannot afford average-usage rate plans, will lose the freedom to choose a more affordable Lifeline plan tailored to their needs.

² See Lifeline and Link Up Reform and Modernization, WC Docket No. 11-42; Telecommunications Carriers Eligible for Universal Service Support, WC Docket No 09-197; Connect America Fund, WC Docket No. 10-90, Third Report and Order, Further Report and Order, and Order on Reconsideration (Rel. April 27, 2016) ("Lifeline Reform Order").

REQUEST NO. 4

In light of the *Lifeline Reform Order*, explain how a reduction in the amount of, or elimination of, KUSF support would impact the provision of Lifeline service in Kentucky.

Response: As explained in the Response to Request No. 3 above, the net costs to the Lifeline customer will increase in light of changes introduced by the Lifeline Reform Order, including regulations on minimum service amounts. Many of the Company's Lifeline customers rely on a free service option, with only 7.14% of customers, on average, purchasing additional airtime. With an increase in required plan benefits and therefore plan costs, there will be a decrease in the likelihood that certain low-income subscribers will access the essential telecommunications services the Lifeline program and KUSF was intended to provide. Indeed, the subscribers who will not be able to afford the minimum threshold of service will be those the Lifeline program was most intended to protect. The continuation of KUSF support certainly has the potential to impact the continued access to telecommunications—and now broadband—services for these vulnerable consumers.

Exhibit A



Date	June 9, 2014	Reporting Month	May 2014
		Carrier Information	
Co	ompany Name	SelcTel, Inc	
Com	ipany Address	1825 N Bell Street Fremont, NE 68025	5
Te	elephone / Fax	386-492-7927 / 386-492-7928	
Ve	endor Number		

Classification					
Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	<u></u> ,,
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block		
I hereby attest that the	he information reported h	erein is tro	ie and accurate to the b	est of my knowledge.	
Company Official	Susan Cockerham (Printed)	Title	Attorney In Fact	Company Official	Super Cockerban (Signed)
Make check payab. State Treasurer" an report to:					py of this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602 I



Date	July 16, 2014	Reporting Month	June 2014
		Carrier Information	
	mpany Name	SelcTel, Inc	
Comj	pany Address	1825 N Bell Street Fremont, NE 68025	
Te	lephone / Fax	386-492-7927 / 386-492-7928	
Ve	ndor Number		

Classification			()		
Please Circle One	ILEC	CLEC	Cellular	PCS	

Monthly Access Line Data				
1.	Total Access Lines in Service	0		
2.	Surcharge Per Access Line	\$0.08		
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00		
4.	Number of Access Lines Receiving Lifeline Support	0		
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00		

			Signature Block	
I hereby attest that the	he information reported h	erein is tr	ue and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham (Printed)	Title	Attorney In Fact	Company Official Susan Cockerham (Signed)
Make check payab State Treasurer" an	- 1			Send a copy of this report to:
report to: Finance and Admini	stration Cabinet			Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd.

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601

Revised 03-13-2008

Frankfort, KY 40602

P.O. Box 615

Į.

::

1. T T T T T

.

1



Date	August 12, 2014	Reporting Month	July 2014
		Carrier Information	
	Company Name	SelcTel, Inc	*****
Con	npany Address	1825 N Bell Street Fremont, NE 68025	
T	elephone / Fax	386-492-7927 / 386-492-7928	
· V	Yendor Number		

Classification			[2]		
Please Circle One	ILEC	CLEC	✓ Cellular	PCS	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	******
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

, Signature Block						
I hereby attest that th	e information reported h	erein is tr	ue and accurate to the b	est of my knowledge.		
Company Official	Susan Cockerham (Printed)	Title	Attorney In Fact	Company Official Susan Cockesham (Signed)		
	(1111100)			(51g100)		

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601

,

Send a copy of this report to:

Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Date September 15, 2014

Reporting Month August 2014

	Carrier Information
Company Name	SelecTel, Inc
Company Address	1825 N Bell Street Fremont, NE 68025
Telephone / Fax	386-492-7927 / 386-492-7928
Vendor Number	

Classification			I1		
Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	-
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block		
I hereby attest that the	information reported h	erein is tri	ue and accurate to the b	est of my knowledge	,
Company Official	Susan Cockerham (Printed)	Title	Attorney In Fact	Company Official	Sessan Cockerban (Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Date October 14, 2014

Reporting Month September 2014

۰. ;

	Carrier Information					
Company Name	SelecTel, Inc					
Company Address	1825 N Bell Street Fremont, NE 68025					
Telephone / Fax	386-492-7927 / 386-492-7928					
Vendor Number						

Classification Please Circle One	ILEC	CLEC	Cellular	PCS	
			V Oomunar		

	Monthly Access Line Data	****	
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block	
I hereby attest that th	e information reported h	erein is tri	ue and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham (Printed)	Title	Attorney In Fact	_Company Official_ <u>Lugan</u> Cockenhan_ (Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Date November 17, 2014

Reporting Month October 2014

 Carrier Information

 Company Name
 SelecTel, Inc

 Company Address
 1825 N Bell Street Fremont, NE 68025

 Telephone / Fax
 386-492-7927 / 386-492-7928

 Vendor Number
 Vendor Number

Classification Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data	
1.	Total Access Lines in Service	0
2.	Surcharge Per Access Line	\$0.08
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00
4.	Number of Access Lines Receiving Lifeline Support	0
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00

			Signature Block	· · · · · · · · · · · · · · · · · · ·
I hereby attest that th	ne information reported h	erein is tr	ue and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham (Printed)	Title	Attorney In Fact	Company Official Susan Coctoshan (Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Date December 11, 2014

Reporting Month November 2014

	Carrier Information
Company Name	SelecTel, Inc d/b/a SelecTel Wireless
Company Address	1825 N Bell Street Fremont, NE 68025
Telephone / Fax	386-492-7927 / 386-492-7928
Vendor Number	

Classification Please Circle One	ILEC	or no	Cellular	PCS	
Trease Chicle One			Containa	× ~~	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
•	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
	Number of Access Lines Receiving Lifeline Support	0	
	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block	
I hereby attest that the	e information reported h	erein is tru	ie and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham (Printed)	Title	Attorney In Fact	_Company Official_ <u>Lupan Contenham</u> (Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Date	January 13, 2015	Reporting Month	December 2014
		Carrier Information	
Co	ompany Name	SelecTel, Inc d/b/a SelecTel Wireless	
Com	pany Address	1825 N Bell Street Fremont, NE 68025	5
Te	lephone / Fax	386-492-7927 / 386-492-7928	
Ve	endor Number		

Classification					
Please Circle One	ILEC	CLEC	Cellular	PCS	

0
\$0.08
\$ 0.00
0
\$ 0.00

			Signature Block	
I hereby attest that th	e information reported h	erein is tr	ue and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham (Printed)	Title	Attorney In Fact	Company Official <u>Super Cockesham</u> (Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Date February 13, 2015

Reporting Month January 2015

	Carrier Information
Company Name	SelecTel, Inc d/b/a SelecTel Wireless
Company Address	1825 N Bell Street Fremont, NE 68025
Telephone / Fax	386-492-7927 / 386-492-7928
Vendor Number	

Classification			[]		
Please Circle One	ILEC	CLEC	✓ Cellular	PCS	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block	
I hereby attest that the	ne information reported h	erein is tru	ue and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham (Printed)	Title	Attorney In Fact	Company Official <u>Susan Cockerham</u> (Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Reporting Month February 2015
Carrier Information
SelecTel, Inc d/b/a SelecTel Wireless
1825 N Bell Street Fremont, NE 68025
386-492-7927 / 386-492-7928
000-402-10211000-402-1020
-

Classification					
Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block	
I hereby attest that the	e information reported h	erein is tru	ue and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham	Title	Attorney In Fact	_Company Official_Susan Cockerham
	(Printed)			(Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Reporting Month March 2015

	Carrier Information
Company Name	SelecTel, Inc d/b/a SelecTel Wireless
Company Address	1825 N Bell Street Fremont, NE 68025
Telephone / Fax	386-492-7927 / 386-492-7928
Vendor Number	

Classification					
Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	
	• • •		******

			Signature Block	
I hereby attest that the	he information reported h	erein is tru	ue and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham (Printed)	Title	Attorney in Fact	Company Official <u>Susan Cockerlan</u> (Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Date	May 11, 2015	Reporting Month	April 2015
		Carrier Information	·····
Co	mpany Name	SelecTel, Inc d/b/a SelecTel Wireless	
Comj	pany Address	1825 N Bell Street Fremont, NE 68025	
Te	lephone / Fax	386-492-7927 / 386-492-7928	
Ve	ndor Number		

Classification Please Circle One ILEC	CLEC Cellular	PCS	
		· ·	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08_	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	866
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block		
I hereby attest that the	he information reported h	erein is tru	ie and accurate to the b	best of my knowledge.	
Company Official _	Susan Cockerham (Printed)	Title	Attorney In Fact	_Company Official <u>Susan Cocker</u> (Signed)	ham
Make check payab	le to: "Kentucky			Send a copy of this report to:	

Make check payable to: "Kentucky
State Treasurer" and send with this
report to:Send a copy of this report to:Finance and Administration Cabinet
ATTN: KY USF
702 Capital Ave.
Capitol Annex, Room 488A
Frankfort, KY 40601Send a copy of this report to:



Date	June 12, 1	2015	Reporting	Month	May 2015
			Carrier Information		
	Company Name		SelecTel, Inc d/b/a SelecTe	el Wireless	
	Company Address		1825 N Bell Street Fremon	t, NE 68025	
	Telephone / Fax		386-492-7927 / 386-49	2-7928	
	Vendor Number				

Classification					
Please Circle One	ILEC	CLEC	Cellular	PCS	

. .

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block	
I hereby attest that the	e information reported h	erein is tr	ue and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham	Title	Attorney In Fact	Company Official Susar Cockerhan
	(Printed)			(Signed)
Make check payabl State Treasurer" an report to: Finance and Admini ATTN: KY USF 702 Capital Ave. Capitol Annex, Roon Frankfort, KY 4060	d send with this stration Cabinet m 488A			Send a copy of this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602

3



UNIVERSAL SERVICE FUND	

ate July 13, 2015	Reporting Month June 20)15
	Carrier Information	
Company Name	SelecTel, Inc d/b/a SelecTel Wireless	••••••••••••••••••••••••••••••••••••••
Company Address	1825 N Bell Street Fremont, NE 68025	
Telephone / Fax	386-492-7927 / 386-492-7928	
Vendor Number		

	A				
Classification					
Please Circle One	ILEC	CLEC	✓ Cellular	PCS	
		+			

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block	
I hereby attest that the	ne information reported h	erein is tru	ue and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham	Title	Attorney In Fact	Company Official Susan Cockerham
·	(Printed)			(Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602 ÷



Date	August 17, 2015	Reporting Month	July 2015
		Carrier Information	
Comp	bany Name	SelecTel, Inc d/b/a SelecTel Wireless	
Compar	y Address	1825 N Bell Street Fremont, NE 68025	
Telep	hone / Fax	386-492-7927 / 386-492-7928	
Vend	or Number		

Classification					
Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data	
1.	Total Access Lines in Service	0
2.	Surcharge Per Access Line	\$0.08_
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00
4.	Number of Access Lines Receiving Lifeline Support	0
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00

			Signature Block	
I hereby attest that the	information reported he	erein is tru	ue and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham (Printed)	Title	Attorney In Fact	_Company Official_ <u>Susan Contenham</u> (Signed)
Make check payable State Treasurer" and a report to: Finance and Administr ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 4 Frankfort, KY 40601	send with this			Send a copy of this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



September 14, 2015 Date

report to:

ATTN: KY USF

702 Capital Ave.

Capitol Annex, Room 488A Frankfort, KY 40601

Reporting Month August 2015

	Carrier Information
Company Name	SelecTel, Inc d/b/a SelecTel Wireless
Company Address	1825 N Bell Street Fremont, NE 68025
Telephone / Fax	386-492-7927 / 386-492-7928
Vendor Number	

Classification					
Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block	
I hereby attest that the	he information reported he	erein is tru	ie and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham (Printed)	Title	Attorney In Fact	Company Official <u>Lusan Contorhous</u> (Signed)
Make check payab State Treasurer" an				Send a copy of this report to:

Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602

Finance and Administration Cabinet



Date October 21, 20	15 Reporting Month September 2015
	Carrier Information
Company Name	SelecTel, Inc d/b/a SelecTel Wireless
Company Address	1825 N Bell Street Fremont, NE 68025
Telephone / Fax	386-492-7927 / 386-492-7928
Vendor Number	

Classification			— 71		
Please Circle One	ILEC	CLEC	Cellular	PCS	

0	
\$0.08	
\$ 0.00	
0	
\$ 0.00	
	\$0.08_ \$ 0.00 0

		Signature Blo	ock	
I hereby attest that the	e information reported here	ein is true and accurate	to the best of my k	mowledge.
Company Official	Susan Cockerham (Printed)	Title Attorney In	Fact Compan	y Official <u>Susan Cockerhan</u> (Signed)
Make check payable State Treasurer" and report to: Finance and Administ ATTN: KY USF 702 Capital Ave. Capitol Annex, Room Frankfort, KY 40601	e to: "Kentucky send with this tration Cabinet 1 488A			Send a copy of this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602

Revised 03-13-2008

. . . .



Date	November 10, 2015	Reporting Month	October 2015
P		۸	
		Carrier Information	
	ompany Name	SelecTel, Inc d/b/a SelecTel Wireless	
	npany Address	1825 N Bell Street Fremont, NE 6802	5
T	elephone / Fax	386-492-7927 / 386-492-7928	
V	endor Number		

Classification			r		
Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block	
I hereby attest that the	he information reported h	erein is tru	ie and accurate to the b	est of my knowledge.
Company Official	Susan Cockerham (Printed)	Title	Attorney In Fact	Company Official <u>Sucon Cackerham</u> (Signed)
Make check payab State Treasurer" an				Send a copy of this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601

report to:

Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



December 11, 2015 Date____

Reporting Month_____ November 2015 ÷

	Carrier Information
Company Name	
	SelecTel, Inc d/b/a SelecTel Wireless
Company Address	1825 N Bell Street Fremont, NE 68025
Telephone / Fax	386-492-7927 / 386-492-7928
Vendor Number	

Classification	 · · · · · · · · · · · · · · · · · · ·	 	*******				 	 	
Please Circle One	ILEC	CLEC		\checkmark	Cellular	PCS			

Monthly Access Line Data					
1.	Total Access Lines in Service	0			
2.	Surcharge Per Access Line	\$0.08			
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00			
4.	Number of Access Lines Receiving Lifeline Support	0	7,400 talaha karakaraka		
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00			

	÷	Signature Block	
I hereby attest that th	e information reported herein	is true and accurate to the b	pest of my knowledge.
Company Official	Susan Cockerham Title (Printed)	e Attorney In Fact	Company Official <u>Sujan Cortoshan</u> (Signed)
Make check payabl State Treasurer" and report to: Finance and Adminia ATTN: KY USF 702 Capital Ave. Capitol Annex, Roor Frankfort, KY 4060	d send with this stration Cabinet n 488A		Send a copy of this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Date January 18, 2015	Reporting Month December 2015
	Carrier Information
Company Name	SelecTel, Inc d/b/a SelecTel Wireless
Company Address	1825 N Bell Street Fremont, NE 68025
Telephone / Fax	386-492-7927 / 386-492-7928
Vendor Number	

Classification			r		
Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data	•	
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	· .
4.	Number of Access Lines Receiving Lifeline Support	0	· .
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	
		• • •	

		Signature Block	
I hereby attest that the information reported h	erein is tr	ue and accurate to the b	est of my knowledge.
Company Official Susan Cockerham (Printed)	Title	Attorney In Fact	Company Official Susan Carl on houn (Signed)
Make check payable to: "Kentucky State Treasurer" and send with this report to: Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601			Send a copy of this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Date February 11, 2016	Reporting Month	January 2016
	Carrier Information	
Company Name	SelecTel, Inc d/b/a SelecTel Wireless	
Company Address	1825 N Bell Street Fremont, NE 68025	
Telephone / Fax	386-492-7927 / 386-492-7928	
Vendor Number		

Classification					
Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.08	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

		Signature Block		
I hereby attest that the information reported Company Official Jennifer Rabig (Printed)	l herein is tru Title	ue and accurate to the be Attorney In Fact	st of my knowledge. _Company Official	(Signed)
Make check payable to: "Kentucky State Treasurer" and send with this report to: Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601			Kentucky ATTN: Jin 211 Sower P.O. Box 6	·Blvd.



Date_____ March 4, 2016

Reporting Month_____

February 2016

	Carrier Information
Company Name	SelecTel, Inc d/b/a SelecTel Wireless
Company Address	1825 N Bell Street Fremont, NE 68025
Telephone / Fax	386-492-7927 / 386-492-7928
Vendor Number	

Classification			P	1	
Please Circle One	ILEC	CLEC	Cellular	PCS	

Monthly Access Line Data		
1. Total Access Lines in Service	0	
2. Surcharge Per Access Line	\$0.08	
3. Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4. Number of Access Lines Receiving Lifeline Support	0	
5. Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block	
I hereby attest that th	e information reported	herein is tr	ue and accurate to the b	best of my knowledge.
Company Official	Jennifer Rabig	Title	Attorney In Fact	Company Official
• • • • • • • • • • • • • • • • • • •	(Printed)			(Signed)
		<u> </u>		
Make check payable				Send a copy of this report to:
State Treasurer" and report to:	i sena with this			Kentucky Public Service Commissio

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Kentucky Public Service Commission ATTN: Executive Director 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602

Revised 02-15-2016



eApril 11,	2016	Reporting Month	March 2016
	Carrier Informa	ition	
Company Name			
Company Address			
Telephone / Fax	1825 N Bell Street Fremont, NE 68025 386-492-7927 / 386-492-7928		
Vendor Number	300-432-13211300-432-1320	······································	

Classification			F1		
Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.14	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block		
I hereby attest that the Company Official	e information reported Jennifer Rabig	herein is tr Title	ue and accurate to the t Attorney In Fact	best of my knowledge. Company Official	M
	(Printed)				(Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Executive Director 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Date	May 11, 2	2016	Reporting Month	April 2016
		Carrier Informati	ion	
Co	mpany Name	SelecTel, Inc d/b/a SelecTel Wireless	······	
Com	pany Address	1825 N Bell Street Fremont, NE 68025		
Tel	lephone / Fax	386-492-7927 / 386-492-7928		
Ve	ndor Number		· · · · · · · · · · · · · · · · · · ·	

Classification						
Please Circle One	ILEC	CLEC	Cellular	PCS	 	

	Monthly Access Line Data	
1.	Total Access Lines in Service	0
2.	Surcharge Per Access Line	\$0.14
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00
4.	Number of Access Lines Receiving Lifeline Support	0
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00

I hereby attest that the information reported herein is true and accurate to the best of my knowledge. Company Official Jennifer Rabig Title Attorney In Fact Company Official	,
	and the second s
(Printed) (Sighed)	

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Executive Director 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



teJune 8, 2	016	Reporting Month	May 2016
	Carrier In	nformation	
Company Name	SelecTel, Inc d/b/a SelecTel Wireless	3	
Company Address	1825 N Bell Street Fremont, NE 680	025	
Telephone / Fax	386-492-7927 / 386-492-7928		
Vendor Number			

Classification			Patron and a second second		
Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data	· · · · · · · · · · · · · · · · · · ·	
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.14	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

			Signature Block	
I hereby attest that th	e information reported	herein is tr	ue and accurate to the l	pest of my knowledge.
Company Official	Jennifer Rabig	Title	Attorney In Fact	Company Official
a, - · · ·	(Printed)			(Signed)
Make check payable				Send a copy of this report to:
State Treasurer" and report to:	i send with this			Kentucky Public Service Commission

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601

ATTN: Executive Director

211 Sower Blvd. P.O. Box 615

Frankfort, KY 40602



Date July 12, 2016

.

Reporting Month_

area os en culo

June 2016

	Carrier Information
Company Name	SelecTel, Inc d/b/a SelecTel Wireless
Company Address	1825 N Bell Street Fremont, NE 68025
Telephone / Fax	386-492-7927 / 386-492-7928
Vendor Number	

Classification					
Please Circle One	ILEC	CLEC	Cellular	PCS	

Total Access Lines in Service	Monthly Access Line Data	
Amount of Surcharge Remitted to Kentucky USF \$ 0.00	Total Access Lines in Service	0
	Surcharge Per Access Line	\$0.14
Number of Access Lines Receiving Lifeline Support	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00
	Number of Access Lines Receiving Lifeline Support	0
Amount of Reimbursement Requested from Kentucky USF	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00

			Signature Block		
I hereby attest that th Company Official	e information reported Jennifer Rabig (Printed)	herein is tr Title	ue and accurate to the t Attorney In Fact	Dest of my knowledge.	(Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Executive Director 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602



Date_	August 12,	. 2016	Reporting Month	July 2016
		Carrier	Information	
	Company Name	SelecTel, Inc d/b/a SelecTel Wirele	255	
	Company Address	1825 N Bell Street Fremont, NE 6	8025	
	Telephone / Fax	386-492-7927 / 386-492-7928		
	Vendor Number			

Classification			 1		
Please Circle One	ILEC	CLEC	Cellular	PCS	

	Monthly Access Line Data		
1.	Total Access Lines in Service	0	
2.	Surcharge Per Access Line	\$0.14	
3.	Amount of Surcharge Remitted to Kentucky USF	\$ 0.00	
4.	Number of Access Lines Receiving Lifeline Support	0	
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 0.00	

	· · · · · · · · · · · · · · · · · · ·		Signature Block		
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.					
Company Official	Jennifer Rabig (Printed)	Title	Attorney In Fact	Company Official	(Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

Kentucky Public Service Commission ATTN: Executive Director 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602