

## SCRPS Status Update

FCC Form 5640

OMB Control No. 3060-1270

File No. SC-SU0001604

### Applicant Information

Applicant FRN	0003737699	Applicant Address	P.O. Box 456
Applicant Name	Bristol Bay Cellular Partnersh	Applicant City	King Salmon
Applicant Email	tanyam@bristolbay.com	Applicant State	AK
Applicant Phone	9072466399	Applicant ZIP Code	99613

### Contact Information

Is the contact the same as the contact listed on the Application Request for Funding Allocation? If not, please list below.

Contact Name	Earl Hubb	Contact Address	P.O. Box 456
Contact Email	ehubb@bristolbay.com	Contact City	King Salmon
Contact Phone	907-246-6399	Contact State	AK
		Contact ZIP Code	99613

\*Indicate which deadline you are meeting with this filing.

2023-04-11

## Explanation of Effort and Availability of Commercial Equipment

\*Provide an explanation of efforts undertaken, and challenges encountered, in permanently removing, replacing, and disposing of covered communications equipment or service.

Purchase Requests have been issued for 39% of the materials, and replacement equipment are currently in various stages of transit and or delivered. Material purchased include Ericsson radio/eNodeB, Eupen composite cabling/jumpers, Comscope antennas "delivered," and miscellaneous steel not included in this application.

\*Explain whether you are finding commercially available equipment in the marketplace. If not, then explain efforts taken to obtain replacement equipment.

We have been able to find commercially available equipment. We are diligently working to find work around to complete this project with out 61% of the funding.

\* If there is additional information relevant to the preceding questions or that you believe the Commission should be aware of, please include the information below.

For the record I understand the necessity of SCRP program, and you have my wholehearted support.

Not having SCRP project fully funded is creating hardship to achieve compliance in a proper and logical manner. Additionally, not knowing "when or if" the SCRP will be fully funded has resulted in additional costs to our company. One example is when delaying project start while waiting for full funding resulted in logistics nearly doubling in cost due to inflation and 40% fuel surcharges. Also note the FCC cost catalog allowed logistics costs for 20' conex delivered to Unalaska AK, a location 500 miles South of Bristol Bay. BBCP could not include actual shipping costs for typical transport via barge using multiple 40' conex and we will not be reimbursed for actual costs.

We also have concern being reimbursed in a timely manner, we have been asked to make changes 5 times to our first request for reimbursement and still await payment. We have been forced to seek a line of credit and construction loan to assure good standing with our vendors.

On a personal note, not knowing "when or if" has caused an unnecessary burden on all staff and managers involved with SCRP, when a project is started "how to cover costs" should be the first task planned and completed.

## Program Compliance

\*Indicate whether recipient has fully complied with (or is in the process of complying with) all requirements of the Reimbursement Program.

Yes  No

\*Indicate whether recipient has permanently removed from its communications network, replaced, and disposed of (or is in the process of permanently removing, replacing, and disposing of) all covered communications equipment or services that were in the recipient's network as of the date of submission of the recipient's application requesting funding.

Yes  No

If you have not yet completed the removal, replacement, and/or disposal process, what estimated percentage of the removal, replacement, and/or disposal process have you completed?

\*Indicate whether recipient has fully complied with (or is in the process of complying with) the timeline submitted by the recipient. If not, provide explanation for deviation.

Yes  No

\*The filer has indicated no to a question in this section, please provide additional information.

## Certifications

\*By checking the box and providing the electronic signature where indicated below, the Certifying Official on behalf of the filer certifies under penalty of perjury that:

(1) The Certifying Official is authorized to submit this status report on behalf of the above-named filer and, based on information known to me or provided to me by employees responsible for the information being submitted, the information set forth in this status report has been examined and is true, accurate, and complete, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. The Certifying Official acknowledges that any false, fictitious, or fraudulent information or statement, or the omission of any material fact on this status report or on any other document submitted by the filer may subject the filer and the undersigned to punishment by fine or forfeiture under the Communications Act (47 U.S.C. §§ 502, 503(b), 1606), or fine or imprisonment under Title 18 of the United States Code (18 U.S.C. § 1001, §§ 286-287, and § 1343), or can lead to liability under the False Claims Act (31 U.S.C. §§ 3729-3733, and §§ 3801-3812). (2) The filer is in compliance with the statute, rules, and orders governing the Reimbursement Program, including but not limited to allocations, draw downs, payments, obligations and expenditures of money, and the Certifying Official acknowledges that failure to be in compliance and remain in compliance with those statutes, rules, and orders may result in the denial of funding, cancellation of funding commitments, and/or recoupment of past disbursements. The Certifying Official acknowledges that the filer will maintain detailed records, including receipts, of all costs eligible for reimbursement actually incurred for a period of 10 years; and will file all required documentation for its expenses. The Certifying Official acknowledges that failure to comply with the statute, rules, and orders governing the Reimbursement Program could result in civil or criminal prosecution by law enforcement authorities.

## Certifier Information

Certifier Signature	Earl Hubb	Certifier Phone	907-246-3275
Certifier Name	Earl Hubb	Certifier Email	ehubb@bristolbay.com
Certifier Title	General Manager		
Date Signed	2023-04-11		