

SCRPS Status Update

FCC Form 5640

OMB Control No. 3060-1270

File No. SC-SU0001139

Applicant Information

Applicant FRN 0013769708 Applicant Address 801 Enterprise Drive
Applicant Name Hunter Communications & Te Applicant City Central Point
Applicant Email regulatory@hunterfiber.com Applicant State OR
Applicant Phone 5414141419 Applicant ZIP Code 97502

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 Heather Tobias Contact Address 801 Enterprise Drive
Contact Email regulatory@hunterfiber.com Contact City Central Point
Contact Phone 5414141419 Contact State OR
Contact ZIP Code 97502

*Indicate which deadline you are meeting with this filing.

2022-10-13

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.

We have begun ordering equipment to replace the Huawei switching gear and expect 50% delivery by 11/1/22.

We have assigned a project manager to the job and are preceding to schedule replacements of equipment based on supply availability and impacts to the network. We will have 10% completed by 1/30/23 and should be able to complete the rest by 12/30/23.

All equipment to replace the Huawei CMTS deployments was ordered previously and is in stock. Replacements of this equipment are ongoing and expect to have these devices decommissioned and disposed of by 4/1/23.

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

As noted above we have found 50% switching equipment available. We have the remainder on order with vendors, but are receiving mixed messages about whether it will be available within the timeframe. We expect to have a better idea of timelines for the remaining 50% by 1/15/23.

* 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.

We are holding off of reimbursement requests until we can verify availability of equipment as we do not want to exceed the 1 year limitation on replacement.. We will update as soon as have firmer information and feel that we can request reimbursement and complete the scope within the projected year.

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	Sam Ackley	Certifier Phone	541-414-1420
Certifier Name	Sam Ackley	Certifier Email	sackley@hunterfiber.com
Certifier Title	Chief Operations Officer		
Date Signed	2022-10-11		