

SCRPS Status Update

FCC Form 5640

OMB Control No. 3060-1270

File No. SC-SU0002095

Applicant Information

Applicant FRN	0006146120	Applicant Address	219 W. Emmitt Ave
Applicant Name	Southern Ohio Communicatio	Applicant City	Waverly
Applicant Email	gcooper@socs.cc	Applicant State	OH
Applicant Phone	7409472409	Applicant ZIP Code	45690

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	Summit Ridge Group	Contact Address	49 W 38Th
Contact Email	SOCSRNR@summitridgegrou	Contact City	New York
Contact Phone	(212) 433-4800	Contact State	NY
		Contact ZIP Code	10018

*Indicate which deadline you are meeting with this filing.

2023-10-08

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.

With respect to customer premise equipment, SOCS has ordered and received its replacement equipment. The equipment received has been installed at all customer premises, and all customers have been migrated. SOCS employees have been trained on this new equipment. The PON network has also been completed. The Covered Equipment that has been removed from customer homes is being prepared to be inventoried, palletized, and stored in a locked facility, with access controlled by electronic badges. It will be sent for destruction once the SOCS allocation is fully funded.

Regarding the core router and switch equipment, SOCS must wait for its allocation to be fully funded to place that order, a situation that has been made worse by current inflation rates. Depending on when that equipment is ordered, we have been told to expect supply chain delays in delivery, which could require SOCS to request a build deadline extension.

With respect to labor, SOCS continues to have difficulty finding additional employees with adequate telecommunications experience and credentials. The issue is not one of compensation, but rather the lack of suitable candidates. These additional employees are needed for the rip and replace project. SOCS current employees are needed to maintain and grow our core business, so, to the extent that those employees will need to be shifted to rip and replace, their inability to commit to rip and replace full time could result in delays to complete the rip and replace project.

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

SOCS has not encountered any recent difficulties due to equipment availability.

* 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.

As mentioned above, the only equipment remaining before the SOCS network is fully converted off Covered Equipment and compliant with the SCRIP program is the core router and two switches. Due to the lack of full funding of the SCRIP program, SOCS is currently unable to complete their network build. Assuming the most recently submitted invoices will be reimbursed, SOCS only has around \$300,000 left in their current allocation, and the equipment needed to complete their network costs approximately \$800,000. SOCS is a small service provider in rural Ohio and has no way of funding the \$500,000 difference themselves. The lack of full funding has placed an existential threat on SOCS continued survival.

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 all covered communications equipment or services that were in the recipient's network as of the date of the submission of the recipient's application request for funding.

Yes No

If recipient has not yet completed the removal process, what estimated percentage of the removal process have you completed?

90

*Indicate whether recipient has replaced all covered communications equipment or services that were in the recipient's network as of the date of the submission of the recipient's application request for funding.

Yes No

If recipient has not yet completed the replacement process, what estimated percentage of the replacement process have you completed?

90

*Indicate whether recipient has disposed of all covered communications equipment or services that were in the recipient's network as of the date of the submission of the recipient's application request for funding.

Yes No

If recipient has not yet completed the disposal process, what estimated percentage of the disposal process have you completed?

0

*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 **Bret W. Childers**

Certifier Phone **7409473502**

Certifier Name **Bret W. Childers**

Certifier Email **bchilders@socs.cc**

Certifier Title **COO**

Date Signed **2023-10-05**