

## SCRPS Status Update

FCC Form 5640

OMB Control No. 3060-1270

File No. SC-SU0002057

### Applicant Information

Applicant FRN	0012662698	Applicant Address	1107 McArtor Rd
Applicant Name	United Wireless Communicati	Applicant City	Dodge City
Applicant Email	toddh@unitedtelcom.net	Applicant State	KS
Applicant Phone	6202278641	Applicant ZIP Code	67801

### 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	Sam Hariton	Contact Address	4031 University Drive, 2nd Floor
Contact Email	sc.external.rfi.united@widelity	Contact City	Fairfax
Contact Phone	7032393299	Contact State	VA
		Contact ZIP Code	22030

\*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.

My company has conducted work on the removal of covered equipment since the submittal of the last form. We have fully removed equipment from 30 of the sites and work is ongoing. My company has conducted work on the disposal of covered equipment since the submittal of the last form. The first shipment of equipment has been retrieved by the disposal company. My company has conducted work on the replacement of covered equipment and services since the submittal of the last form. We have completed installation of 80 of our sites.

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

We are finding that some equipment and services are commercially available, and some are not.

\* 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.

Timeline Deviation: We are running into complications getting all sites completed under our original anticipated timeline due to material delays, crew availability, and occasional weather delays. We are also concerned with, and impacted by, the failure of Congress to appropriate and make available the additional funding crucial to the successful completion of this important project. Until we have the assurance of total project funding, this project will continue to be delayed as we await the necessary funding required to build and pay for the new network equipment. Quick completion of this rip and replace project is required to provide for enhanced national security, United's mobile network security, and our customer's experience and safety (potential service outages and 911 failures).

## 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?

50

\*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?

70

\*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?

10

\*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	Todd Houseman	Certifier Phone	6202278641
Certifier Name	Todd Houseman	Certifier Email	toddh@unitedtelcom.net
Certifier Title	CEO/GM		
Date Signed	2023-10-06		