



**CONFIDENTIAL, NOT FOR PUBLIC INSPECTION**

May 25, 2018

Via Certified Mail

#70171000000082833912

Marlene H. Dortch, Secretary  
Federal Communications Commission  
445-12<sup>th</sup> Street, SW  
Washington, DC 20554

**Re: FCC Form 395 - Lafourche Telephone Company, L.L.C.**

Dear Ms. Dortch,

On behalf of Lafourche Telephone Company, L.L.C. and in compliance with Section 1.815 of the Commission's rules (47 C.F.R. § 1.815), FCC Form 395 entitled "Common Carrier Annual Employment Report" is attached. We request that the report be treated as confidential and not for public inspection.

Therefore, the electronic version of this filing contains a redacted copy of the report, while the forms sent via certified, registered mail are marked "CONFIDENTIAL, NOT FOR PUBLIC INSPECTION." The original and four (4) copies of this transmittal letter and the report are enclosed via U.S. mail.

Also enclosed is a copy of this transmittal letter marked "FILE STAMPED COPY" for stamp and return in the enclosed self-addressed stamped envelope as proof of filing.

Should you have any questions regarding this filing, please contact me directly at (225) 621-3828.

Sincerely,

A handwritten signature in black ink, appearing to read 'Kristy Boxberger', is written over a circular embossed seal.

Kristy Boxberger  
Attorney

Enclosure

112 West 10<sup>th</sup> Blvd.  
P.O. Box 188  
Larose, LA 70373  
(985) 693-4567  
viscom.net

FEDERAL COMMUNICATIONS COMMISSION  
Washington, DC 20554

Approved by OMB

3060-0076

Est. time per response:

1 hour

## COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

## SECTION I - General Information

1. Name and Mailing Address of Respondent

Lafourche Telephone Company, L.L.C.  
913 S. Burnside Ave.  
Gonzales, LA 70737☐ Check here if this  
is a change of  
address.

2. Year Report Filed

2018

3. Reporting Period (Ending Date of Pay  
Period Covered by Report)

Redacted/Confidential

4. Number of Full-Time Employees during Selected  
Reporting Period (check one):

- a.
- ☐
- Fewer than 16 (complete Sections I, IV, and V only)
- 
- b.
- ☐
- 16 or more (complete all sections)

## SECTION II - Full-Time Employees.

Job Categories	Number of Employees (Report employees in only one category)																Total Columns A - N	
	Hispanic or Latino		Race/Ethnicity															
			Male							Female								
			White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races				
Executive/Senior Level Officials and Managers	1.1																	0
First/Mid-Level Officials and Managers	1.2																	0
Professionals	2																	0
Technicians	3																	0
Sales Workers	4																	0
Administrative Support Workers	5																	0
Craft Workers	6																	0
Operatives	7																	0
Laborers and Helpers	8																	0
Service Workers	9																	0
TOTAL	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
PREVIOUS YEAR TOTAL	11																	0

## SECTION III - Part-Time Employees.

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Number of Employees  
(Report employees in only one category)

Race/Ethnicity

Job Categories	Hispanic or Latino														Not-Hispanic or Latino														Total Columns A - N
	Male		Female		Male										Female														
					White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian					American Indian or Alaska Native	Two or more races									
	A	B	C	D	E	F	G	H	I	J	K	L	M	N															
Executive/Senior Level Officials and Managers	1.1																	0											
First/Mid-Level Officials and Managers	1.2																	0											
Professionals	2																	0											
Technicians	3																	0											
Sales Workers	4																	0											
Administrative Support Workers	5																	0											
Craft Workers	6																	0											
Operatives	7																	0											
Laborers and Helpers	8																	0											
Service Workers	9																	0											
TOTAL	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0											
PREVIOUS YEAR TOTAL	11																	0											

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## SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.

☐ This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report.

☐ This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.)

## SECTION V - Certification

I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.

Date	05/25/18	Typed or Printed Name of Person Signing	John Scanlan	Signature	<i>John Scanlan</i>	Telephone No.	(225) 621-3828
Title of Person Signing	CEO	WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).					