



TC05-047

## NOTICE TO CUSTOMERS OF S&S COMMUNICATIONS

To Whom It May Concern:

The South Dakota Public Utilities Commission (Commission) has information indicating that you, your company or the company you work for may have been a long distance telephone customer of S&S Communications (S&S) at the time of the S&S business failure (on or about June 3, 2002). If this is incorrect and you, your company, or the company you work for was NOT a customer of S&S, please disregard this notice.

Currently, the Commission has in its possession bond proceeds of \$150,000. The Commission is actively trying to recover additional proceeds and has opened a Commission proceeding (docket TC05-047) to determine how and to whom these bond proceeds will be distributed. These proceeds will be paid to S&S customers to help reimburse them for long distance services paid for but not received. The proceeds will not be used to recover any other damage claims against S&S.

Although you have a right to file a claim no matter what your actual financial loss may be, we are not encouraging persons who did not sustain a significant loss to file a claim. Currently it is estimated that the total potential claims against these bond proceeds could reach as high as \$2,000,000 or greater. It is therefore very likely that **claimants will receive only a fraction of their claim amounts**. Additionally, customers who received service for longer periods of time may have received their money's worth when measured by the true cost of such services. Therefore, Commission staff may recommend to the Commission that bond awards be weighted more heavily in favor of customers who bought in last, since they sustained the greatest losses. Commission staff may also recommend that the Commission not make bond award payments to persons who received services for more than a specified percentage of their contract terms unless they can demonstrate that they did not break even on a true cost basis before service was disconnected.

If you, your company, or the company you work for was a long distance telephone customer of S&S and you feel you sustained a significant loss as a result of S&S's failure to provide all of the services you paid for, you should consider completing and returning the enclosed bond claim. If you had contracts with S&S that were purchased on different dates, you must complete an individual bond claim for each contract you purchased. You must also provide support for your claim such as a copy of the contract between you and S&S or proof of payment for the services. If you financed the S&S contact amount (made monthly payment installments to a third party financing company), you must also include the amount of the loan that was forgiven (if any) by the financing company.

**PLEASE TAKE NOTICE: ALL BOND CLAIM FORMS MUST BE MAILED ON OR BEFORE OCTOBER 7, 2005 OR YOU WILL BE FORECLOSED FROM RECEIVING ANY OF THE BOND PROCEEDS.**

Please complete and mail the enclosed bond claim form together with a copy of your contract with S&S or proof of payment to:

South Dakota Public Utilities Commission  
C/O S&S Bond Claim Form  
500 East Capitol Avenue  
Pierre, SD 57501-5070

If you have any questions you may contact the Commission at 1-800-332-1782 or review the docket information for TC05-047 on the Commission's website at [www.puc.sd.gov](http://www.puc.sd.gov) under Commission Actions/Commission Dockets.

**PROOF OF CLAIM FORM**

I, \_\_\_\_\_ (your name), the undersigned, do hereby submit this claim against any applicable bond or other funds for the following telecommunication services prepaid to S&S Communications:

NAME OF CLAIMANT (your name): \_\_\_\_\_

CLAIMANT'S BUSINESS NAME (if applicable): \_\_\_\_\_

ADDRESS OF CLAIMANT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

DURATION OF CONTRACT: \_\_\_\_\_

DATE CONTRACT SIGNED: \_\_\_\_\_

DATE SERVICE STARTED: \_\_\_\_\_

AMOUNT PREPAID: \_\_\_\_\_

EXPLANATION OF CLAIM: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DID YOU FINANCE THE CONTRACT (make monthly payments to a financing company)?:

**YES** or **NO** (Circle one)

**IF YES**

NAME OF FINANCE COMPANY: \_\_\_\_\_

AMOUNT OF LOAN FORGIVEN: \_\_\_\_\_

**You must attach copies of the above contract(s) or proof of payment.**

**The undersigned submits the above claim and states that it and all attachments are true under penalty of law.**

\_\_\_\_\_  
Signature of Claimant

\_\_\_\_\_  
Date

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