

Control Number: 30238



Item Number: 889

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December 21, 2009

Public Utility Commission of Texas 701 N Congress Ave. Austin, TX 78701 Attn: Central Records

RE: Study Concerning Cable and Video Providers mandated by Texas Legislature PUC Project No. 37172 (Oct. 1, 2008 through Sept. 30, 2009)

Dear Filing Clerk:

Enclosed please find our HUB Report and our Workforce Diversity Report for the reporting period October 1, 2008 through September 30, 2009 for Cameron Communications, LLC.

Should you have any questions or require additional information, please contact us.

Sincerely,

Amy Louviere

Accounts Payable Coordinator

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**Enclosure** 

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(2) Expenditures for goods and services from vendors not including wages, benefits, and other non-nepritable goods and services goods and services from vendors not including wages, benefits, and other non-nepritable goods and services goods and services from vendors not including wages, benefits, and other non-nepritable goods and services and notice.	such as toyes and nothing	negotiable goods and services	vages, benefits, and other non-	vices from vendors not including v	(2) Expenditures for goods and se		(1) Vendors for whom HUB status is not directly known.
		ocurement	ased Power Pr	Total Non-Fuel, Fuel, and Purchased Power Pro	Total Non-Fuel,	•	
		•	ment (electric only)	Total Fuel and Purchased Power Procurement (electric only)	Total Fuel and Purc		
Purchases							
^	0	0	0	0	0	0	Total Non-Fuel Procurement (2)
	0	0	0	0	0	0	रिंदा Unknown Status Procurement (1)
	0	0	0	0	0	0	Total MBE & WBE Procurement
	0	0	0	0	0	0	WBE Total (Non-Minority Female)
	0	0	0	0	0	0	MBE Total (Male/Female Minority)
	0	0	0	0	0	0	Total
	0 0	0	o o		0	0	Female
	2	D.	0	0	0	0	Male Male
	0	· 原作 电电子电子 计数据 电电子 医甲基甲虫	0		0	0	Total
	0 0	0	0			0	Female
				0	0	0	Hispanic American Male
	0		0	0	0	0	Total
	0 0	. •			0	0	Female
	O .	0	0	0	0	0	Male
	0		0	0	0	0	Total
	0 0	0.0				0	Female
			0	0	0	0	Male Male
МВЕ Ехр.	МВЕ Ехр.	Equipment MBE Exp.	МВЕ Ехр.	МВЕ Ехр.	МВЕ Ехр.	МВЕ Ехр.	
Total HUB	Other	Major	rrotessional	Comer per vices	Commounte		MBE Procurement

Reporting Period:
Address: P.O. Box 167
City: Sulphur Sta

State: LA Zip: 70664

Oct. 1, 2008 through Sep. 30, 2009

Reporting Date: Contact person:

December 30, 2009 Bruce Petry

Phone: 337-583-2111 Fax: 337-583-2026

# SMALL UTILITIES HUB USE REPORT (Texas purchases)

Utility: Cameron Communication, LLC

MBE Procurement	Construction	Commodities	Other Services	Professional	Major	Other	Total HUB
P	Expenditures	Expenditures	Expenditures	Expenditures	Expenditures	Expenditures	
Airican American Male	0	0	O		- 1		
Female	0	0		<b>&gt;</b> •	•	> <	
Total	0	0	***************************************	0		0	T
Asian American		<u> </u>	U	0	0	0	Г
Male	0	0	<del>-</del>	<b>-</b>	•	>	
Female	0	0		0	0 0		
Total	0	0	301001111000000000000000000000000000000	0	0		1
Hispanic American Male	0	0		,		, (	T
Female	0	0	0	0		0 0	
Total	0	0	0	0	0	0	1
Native American Male	O.	>					T
Female	0	0	0 (	0	0.0	o c	
Total	0	0	0	0	0	0	
MBE Total (Male/Female Minority)	0	0	0	0	0	0	
WBE Total (Non-Minority Female)	0	· 0	0	0	0	0	
							H
Total MBE & WBE Procurement	0	0	0	0	0	0	
Total Unknown Status Procurement (1)	0	0	0	0	0	0	
Total Non-Fuel Procurement (2)	0	0	0	0	0	0	
		Total Fuel and Pur	Total Fuel and Purchased Power Procurement (electric only)	rement (electric only			1
		Total Non-Fue	Total Non-Fuel, Fuel, and Purchased Power Procurement	hased Power P	rocurement		
(1) Vendors for whom HUB status is not directly known	•	(2) Expenditures for goods and	(2) Expenditures for goods and services from vendors not including wages, benefits, and other non-negotiable goods and services such as taxes and nostage. Includes MRF/WRF	ng wages, benefits, and other no	n-negotiable goods and se	rvices such as taxes and n	ost 2

Reporting Period: Address: P.O. Box 167 City: Sulphur State: LA Zip: 70663

Oct. 1, 2008 through Sep. 30, 2009

Reporting Date: December 30, 2009 Contact person: Bruce Petry

Phone: 337-583-2111 Fax: 337-583-2026

### WORKFORCE AND SUPPLIER DIVERSITY FORM WORKFORCE DIVERSITY

	0	0	0	0	0	0	0	0	2	0	2	2	This Year Totals
<del> </del>										0	0	0	Previous Year Totals
										0	0	0	Service Workers
				-						0	0	0	Laborers (Unskilled)
	,									0	0	0	Operatives (Semi-skilled)
										0	0	0	Craft Workers (Skilled)
										0	0	0	Office and Clerical
										0	0	0	Sales Workers
										0	0	0	Technicians
									2	0	2	2	Professionals
										0	0	0	Officials and Managers
Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	3	
an I	American Indian	Asian	As	Hispanic	Hisp	African American	Afr Ame	Caucasian	Cauc	y Totals	Company Totals	Combined Total	Occupational Categories
	EAR	ING YI	EPORT	FOR RI	EMPLOYEES FOR REPORTING YEAR	EMPLO		NUMBER OF TEXAS FULL-TIME	TEXAS	ER OF	NUMB		

NOTE: Double-click on embedded Excel chart to open. Click on a cell or use arrow keys to select an occupational category and ethnic group to update workforce diversity numbers. Do not enter information in Combined Total and Company Totals columns or the This Year Totals row as these will update automatically. Cells left blank will be counted as zero. Click anywhere outside of chart to exit.

## **HUB/SMALL BUSINESS PROCUREMENT AS A PERCENTAGE OF TOTAL COMPANY PROCUREMENT** WORKFORCE AND SUPPLIER DIVERSITY FORM

%	0.0000%	0.0000%	Other (8)
%	0.0000%	0.0000%	Major Equipment (7)
%	0.0000%	0.0000%	Professional Services Contracts (6)
%	0.0000%	0.0000%	Other Services (5)
%	0.0000%	0.0000%	Commodities Contracts (4)
%	0.0000%	0.0000%	Construction Contracts (3)

- Americans, and American Indians; (B) a sole proprietorship formed for the purpose of making a profit that is 100 percent owned, operated, and controlled by a person described by shares of stock or other equitable securities is owned by one or more persons who are members of certain groups, including black Americans, Hispanic Americans, women, Asian Pacific the partnership's affairs; or (D) a joint venture in which each entity in the joint venture is a historically underutilized business under this subdivision. persons described by Paragraph (A) of this subdivision. Those persons must have proportionate interest and demonstrate active participation in the control, operation, and management of Paragraph (A) of this subdivision; (C) a partnership formed for the purpose of making a profit in which 51 percent of the assets and interest in the partnership is owned by one or more (1) HUB -- Pursuant to Texas Government Code § 481.191(4), HUB means: (A) a corporation formed for the purpose of making a profit in which at least 51 percent of all classes of the
- in this state; (B) is formed to make a profit; (C) is independently owned and operated; and (D) employs fewer than 100 full-time employees. (2) Small Business -- Pursuant to Texas Government Code § 481.191(6), Small Business means a corporation, partnership, sole proprietorship, or other legal entity that: (A) is domiciled
- concrete construction of roads, trenching, cable laying, conduit construction, land clearing and leveling, (3) Construction -- Construction done by general contractors and special trade contractors which includes new work, additions, alterations, reconstruction, installations, repairs, remodeling, renovating, and repair of office buildings. Heavy construction other than buildings such as pipelines, communication and power lines, sewer and water mains, asphalt and
- Commodities -- All materials, goods or tangibles purchased to conduct business, not including fuel or purchased power contracts and major equipment purchases and rentals
- services, landscaping, forestry, tree trimming, art and decorative services, janitorial, travel/lodging, automotive repair, and photography (5) Others Services -- All specialty work, special circumstances that required contract labor, special consultants or other non-defined services. Examples include audio/visual, staffing
- (6) Professional Services -- Contracted professional services which include legal, consulting, health, engineering, accounting, advertising/marketing, architectural, real estate, computer services, research and analysis, education/training, insurance, surveying services, weather services, environmental, financial, etc.
- equipment, heavy construction equipment, fleet requirements, etc (7) Major Equipment -- Includes all major equipment purchases and rentals including but not limited to transmission and distribution equipment, power plant equipment, substation
- (8) Other Any commodity or service not covered by the above categories.

### Dear Vendor:

As you may know, the Texas Legislature enacted a law that requires the reporting of certain information concerning our use of historically underutilized businesses as defined in the TEX. GOV'T CODE @ 481.101 (1995) to the Public Utility Commission of Texas.

To assist us in completing this legislative mandate, we are requesting that you complete the enclosed information sheet and return it to us as soon as possible by using the enclosed self addressed envelope, or by faxing it to(337) 583-2026. As always, we continue to purchase products and services on the basis of value and support to our company, customers, and community.

If after reading the enclosed information you have questions concerning this request, please feel free to contact Amy Louviere at (800) 737-3900, ext.270.

Thank you in advance for complying with our request for this information.

Sincerely,

Amy Louviere Accounts Payable Coordinator

Cameron Communications, LLC dba Cameron Telephone Co., LLC- Texas Division

Phone: (337) 583-2023 Fax: (337) 583-2026

Enclosure

### **BUSINESS CERTIFICATION**

CHECK ALL THAT APPLY (Please recentifications Definitions)	fer to attached sheet for Business Type
<ul><li>( ) Small Business</li><li>( ) Woman-Owned Business</li><li>( ) Foreign-Owned Business</li></ul>	<ul><li>( ) Historically Underutilized Business</li><li>( ) Non-Profit Business</li></ul>
Please indicate the category for the individ	lual(s) who own and operate this business:
<ul> <li>( ) Black American</li> <li>M ( ) F ( )</li> <li>( ) Asian Pacific American</li> <li>M ( ) F ( )</li> <li>( ) Woman</li> </ul>	<ul> <li>( ) Hispanic American</li> <li>M ( ) F ( )</li> <li>( ) American Indian</li> <li>M ( ) F ( )</li> </ul>
Type of Product/Service:	
Name of Business:	
Business Address (include County where	office is located)
Company Officer completing this form: _	
Signature of Company Officer	Date

PLEASE COMPLETE THIS FORM AND FORWARD TO THE TELEPHONE COMPANY OFFICE ON AN ANNUAL BASIS.