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### **E-Rate Productivity Center** FCC Form 500 Confirmation Notification

This confirmation notification is an acknowledgement that USAC has received CARSON CITY SCHOOL DISTRICT's FCC Form 500 #80629 for Funding Year 2016 on 10/27/2017. Each of the service providers for each of the FRNs on this form will also be receive a copy of this confirmation. Once we have successfully processed this form, you will receive another notification called the FCC Form 500 Notification Letter, which will indicate whether we were able to make the requested changes.

It is important that you review this request now to make sure the information you have filed is accurate.

Click on the date/time at the bottom of this FCC Form 500 Confirmation Letter to see a printable version.

#### **NEXT STEPS**

- Gather the documentation you used to complete your request so that you can respond to any questions from USAC about your request.
- Retain documentation showing that you have complied with all E-rate program rules for at least 10 years after the later of the last day of the applicable funding year or the service delivery deadline for the relevant funding request.
- You can view your entire Form 500 by clicking the link below.

Please keep a copy of this confirmation for your records.

CCSD 1617 Invoice ext... #143434 - CARSON CIT... #143015860 - Eschelon...

Oct 27, 2017 ☆ 🔒 [Comment](#) [Hide Info](#) ▲

**FCC Form 500  
Number** 80629

**Billed Entity** CARSON CITY SCHOOL DISTRICT (BEN: 143434)

**Submission Date** Oct 27, 2017

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## CCSD 1617 Invoice extension APP161022020 - #80629

[Summary](#)



[Associated FRNs](#)

[News](#)

[Related Actions](#)

In-Review

Outreach

Wave Ready

Committed

## Funding Commitment Adjustment Request Form

### FCC Form 500 Details

[View Status \(+\)](#)**Funding Year** 2016**Submitting Organization** CARSON CITY SCHOOL DISTRICT (BEN: 143434)**Created By** Sherri Martinez**Created On** 10/27/2017 7:12 PM EDT

### Main Contact

**Name** Sherri Martinez**Email** smartinez@sherconsultingllc.net**Phone Number** 602-321-5505

### Service Start Date Change

| FRN        | Application Number | Application Nickname | FRN Nickname                                  | Category of Service | SPIN      | SPIN Name                       | Original SSD | New SSD   |
|------------|--------------------|----------------------|---|---------------------|-----------|---------------------------------|--------------|-----------|
| 1699041850 | 161022020          | CCSD 471 C1 1617     | Internet Access - Switched Ethernet on Demand | Category 1          | 143015860 | Eschelon Telecom of Nevada, Inc | 6/30/2017    | 6/30/2017 |
| 1699042660 | 161022020          | CCSD 471 C1 1617     | Eschelon ISDN PRI                             | Category 1          | 143015860 | Eschelon Telecom of Nevada, Inc | 6/30/2017    | 6/30/2017 |

**Narrative:** Service Provider is questioning the validity of FRN 1699041660; App 161022020. Eschelon Telecom of Nevada lis listed as Service Provider.

Thank you,

Monica Canaday

[View Supporting Documentation \(+\)](#)

DOWNLOAD AND PRINT

FCC Form 500 is being exported.You will receive a task to download the exported data when it is available.

|                                      |                     |               |                   |                   |                          |                                  |  |
|--------------------------------------|---------------------|---------------|-------------------|-------------------|--------------------------|----------------------------------|--|
| <b>SUBMITTING_ORGANIZATION</b>       | <b>FUNDING_YEAR</b> | <b>STATUS</b> | <b>CREATED_BY</b> | <b>CREATED_ON</b> | <b>MAIN_CONTACT_NAME</b> | <b>MAIN_CONTACT_PHONE_NUMBER</b> | <b>MAIN_CONTACT_EMAIL</b>  |
| CARSON CITY SCHOOL DISTRICT(BEN: 14: | 2016                | In Review     | smartinez@she     | 27-Oct-2017 23:12 | Sherri Martinez          | 602-321-5505                     | <a href="mailto:smartinez@sherconsultingllc.net">smartinez@sherconsultingllc.net</a> |

**Application Information**

|                      |                  |
|----------------------|------------------|
| Application Number   | 161022020        |
| Application Nickname | CCSD 471 C1 1617 |
| Category of Service  | 1                |

**Selected Change Types****Selected?****Narrative**

|                                    |     |  |
|------------------------------------|-----|--|
| Service Start Date Change          | Yes | Service Provider is questioning the validity of FRN 1699041660; App 161022020. Eschelon Telecom of Nevada lis listed as Service Provider. Thank you,Monica Can |
| Contract Expiration Date Change    | No  |  |
| Service Delivery Extension Request | No  |  |
| Cancel FRN Request                 | No  |  |
| Reduce FRN Request                 | No  |  |
| Equipment Transfer Request         | No  |  |

**FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT**

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. No authorization can be granted unless all information requested is provided. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization. The public reporting for this collection of information is estimated to range from 1 to 1.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission,AMD-PER, Paperwork Reduction Act Project (3060-0853), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS. Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0853.

| FRN        | FRN_NICKNAME             | SPIN    | SPIN_NAME                   | ORIGINAL_SERVICE_START_DATE | NEW_SERVICE_START_DATE |
|------------|--------------------------|---------|-----------------------------|-----------------------------|------------------------|
| 1699041850 | Internet Access - Switch | 1430158 | Eschelon Telecom of Nevada, | 30-Jun-2017                 | 30-Jun-2017            |
| 1699042660 | Eschelon ISDN PRI        | 1430158 | Eschelon Telecom of Nevada, | 30-Jun-2017                 | 30-Jun-2017            |

| CERTIFIED_BY    | CERTIFIED_ON         | TITLE      | EMPLOYER        | PHONE        | EMAIL                          | ADDRESS                                       |
|-----------------|----------------------|------------|-----------------|--------------|--------------------------------|---|
| Sherri Martinez | 27-Oct-2017 23:12:41 | Consultant | Sherri Martinez | 602-321-5505 | smartinez@sherconsultingllc.ne | 14027 N Hampstead Dr;;Fountain Hills,AZ 85268 |

### Certifications

|                                     |  |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | I certify that I am authorized to submit this form on behalf of the above-named billed entity, that I have examined this request, and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.  |
| <input checked="" type="checkbox"/> | I understand that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the services receive an appropriate share of benefits from those services.  |
| <input checked="" type="checkbox"/> | I will retain for at least ten years (or whatever retention period is required by the rules in effect at the time of this certification) after the later of the last day of the applicable funding year or the service delivery deadline for the funding request (1) any and all records that I rely upon to complete this form and (2) all documents necessary to demonstrate compliance with the statutory or regulatory requirements for the schools and libraries universal service support program. I recognize that I may be audited pursuant to this application and the applicant must produce such records as required by 47 C.F.R. § 54.516. |