

**S-RESA  
INVOICE**

P.O. Box 18859  
Hattiesburg, MS 39404-8859  
www.s-resa.org

Page 1

Invoice No 356  
Date 03/03/2011  
PO No Application  
Remit To S-RESA  
409 North 37th Ave.  
P. O. Box 18859  
Hattiesburg MS 39404-8859

Customer 00000551  
Clarksdale Municipal School District  
P. O. Box 1088  
Clarksdale MS 38614-      

*received 04-29-11  
deposited 05-06-11*

Qty	Description	Unit Price	Total
1	2010-11 Annual S-RESA Associate Membership and cooperative purchasing services	600.00	600.00
<b>Total</b>			<b>600.00</b>

Thank you for your business.

**CUSTOMER**

15:00

(FAX)

P.002/004

### S-RESA/SCMCEED Membership Application

S-RESA/SCMCEED membership is obtained and renewed through the payment of an annual membership fee. The amount of the annual fee for regular membership is based on district student enrollment ranging from \$1600 to \$4300. (See table below.) Regular membership provides the superintendent a voting seat on the Advisory Board and the opportunity to serve on the Executive Board. Member districts and their employees are offered periodic free member services and discounts on all fee-based services.

Student Enrollment*	Membership Fee
1499 or fewer	\$1600
1500-2499	\$2200
2500-3499	\$2900
3500-4499	\$3600
4500 or more	\$4300

\*Most recent total district enrollment as reported through MAARS

The following excerpt from the minutes of the SCMCEED/S-RESA January 2007 Executive Board meeting provides the rationale, definition and benefits of "SCMCEED/S-RESA Associate Membership":

It was explained that non-member districts had expressed an interest in taking advantage of some of the collective purchasing opportunities offered through SCMCEED/S-RESA. Board members examined "Article III: Membership" of the SCMCEED By-Laws and discussed setting up a special membership. On motion of Jack McAlpin, seconded by Ike Sanford, the board unanimously voted to set up an Associate membership. Associate members will pay a fee of \$600 to participate in SCMCEED collective purchasing activities. Associate members will not have SCMCEED/S-RESA voting rights or representation on the boards. An associate member may attain full membership status by paying the difference between the \$600 and the membership fee established for their range level in student enrollment.

District: Clarksdale Municipal School District

Type of Membership for which applying: ☐ Regular ☒ Associate

Authorizing signature: Dennis Dugan

Date: March 4, 2011

Fax application to 601.266.6766 or mail to S-RESA  
P. O. Box 18859  
Hattiesburg, MS 39404  
Telephone: 601.266.6777



03/04/2011 15:00

(FAX)

P.003/004

**SOUTH CENTRAL MISSISSIPPI CONSORTIUM FOR  
EDUCATIONAL EXCELLENCE AND DEVELOPMENT  
(SCMCEED)  
E-RATE LETTER OF AGENCY  
FOR PROGRAM YEAR 14, 2011-2012**

This is to confirm our participation in the SCMCEED E-Rate Consortium for the procurement of Telecommunications, Internet Access, and Web page hosting. I hereby authorize SCMCEED to submit FCC Form 470, FCC Form 471, and other E-rate forms to the Schools and Libraries Division of the Universal Service Administrative Company on behalf of our school system listed at the end of this letter.

I understand that, in submitting these forms on our behalf, you are making certifications for our school system. By signing this Letter of Agency, I make the following certifications:

- (a) I certify that the schools in our system under the statutory definitions of elementary and secondary schools found in the No Child Left Behind Act of 2001, 20, U.S.C. Secs. 7801 (18) and (38), that do not operate as for-profit businesses and do not have endowments exceeding \$50 million.
- (b) I certify that our schools has/have secured access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity, necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support. I certify that to the extent that the Billed Entity is passing through the non-discounted charges for the services requested under this Letter of Agency, that the entities I represent have secured access to all of the resources to pay the non-discounted charges for eligible services from funds to which access has been secured in the current funding year.
- (c) I certify that our schools is/are covered by technology plans that are written, that cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body, and an SLD-certified technology plan approver, prior to the commencement of service. The plans were written at the following level(s):  
\_\_\_\_\_ an individual technology plan for using the services requested in this application; and/or  
☒ higher-level technology plan(s) for using the services requested in this application; or  
\_\_\_\_\_ no technology plan needed: applying for basic local, cellular, PCS, and/or long distance telephone service and/or voice mail only.
- (d) I certify that the services the school, library or district purchases at discounts provided by 47 U.S.C. Sec. 254 will be used solely for educational purposes and will not be sold, resold, or transferred in consideration for money or any other thing of value, except as permitted by the Commission's rules at 47 C.F.R. Sec. 54.500(k).
- (e) I certify that our schools have complied with all program rules and I acknowledge that failure to do so may result in denial of discount funding and/or cancellation of funding commitments. I acknowledge that failure to comply with program rules could result in civil or criminal prosecution by the appropriate law enforcement authorities.
- (f) I acknowledge 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 service, receive an appropriate share of benefits from those services.



03/04/2011 15:00

(FAX)

P.004/004

- (g) I certify that I will retain required documents for a period for at least five years after the last day of service delivered. I certify that I will retain all documents necessary to demonstrate compliance with the statute and Commission rules regarding the application for, receipt of, and delivery of services receiving schools and libraries discounts, and that if audited, I will make such records available to the Administrator. I acknowledge that I may be audited pursuant to participation in the schools and libraries program.
- (h) I certify that I am authorized to order telecommunications and other supported services for the eligible entity(ies) covered by this Letter of Agency. I certify that I am authorized to make this request on behalf of the eligible entity(ies) covered by this Letter of Agency, that I have examined this Letter, that all of the information on this Letter is true and correct to the best of my knowledge, that the entities that will be receiving discounted services under this Letter pursuant to this application have complied with the terms, conditions and purposes of the program, that no kickbacks were paid to anyone and that false statements on this form can be punished by fine or forfeiture under the communications Act, 46 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001 and civil violations of the False Claims Act.
- (i) I acknowledge that FCC rules provide that persons who have been convicted of criminal violations or held civilly liable for certain acts arising from their participation in the schools and libraries support mechanism are subject to suspension and debarment from the program. I will institute reasonable measures to be informed, and will notify USAC should I be informed or become aware that I or any of the entities, or any person associated in any way with my entity and/or the entities, is convicted of a criminal violation or held civilly liable for acts arising from their participation in the schools and libraries support mechanism.
- (j) I certify, on behalf of the entities covered by this Letter of Agency, that any funding requests for internal connections services, except basic maintenance services, applied for in the resulting FCC Form 471 application are not in violation of the commission requirement that eligible entities are not eligible for such support more than twice every five funding years beginning with Funding Year 2005 as required by the Commission's rules at 47 C.F.R. Sec. 54.506(c).
- (k) I certify that, to the best of my knowledge, the non-discount portion of the costs for eligible services will not be paid by the service provider. I acknowledge that the provision, by the provider of a supported service, of free services or products unrelated to the supported service or product constitutes a rebate of some or all of the cost of the supported services.
- (l) I certify that I am authorized to sign this Letter of Agency and, to the best of my knowledge, information, and belief, all information provided to SCMCEED for E-rate submission is true.

Full District Name: Clarksdale Municipal School DistrictSignature of authorized person: Mr. Dennis J. Dupree, Sr.Printed name of authorized person: Dennis DupreeTitle of position of authorized person: SuperintendentDate signed: March 4, 2011



008141

*Dennis Dug Kamelach*

906014 SRESA Check #8141

April 27, 2011

\$600.00

PO# 85888

Claim #612705

Invoice #356

Invoice Date 03/03/2011

Invoice Amount \$600.00

P O Description Membership

FOR SECURITY PURPOSES THE FACE OF THIS DOCUMENT CONTAINS A COLORED BACKGROUND AND MICROPRINTING

008141

CLARKSDALE MUNICIPAL

SCHOOL DISTRICT  
CLARKSDALE, MISSISSIPPI 38614  
ACCOUNTS PAYABLE FUNDCITIZENS BANK  
CLARKSDALE, MS 38614  
86-155082DATE 04/27/11  
CHECK NO 8141

PAY Six hundred Dollars 00/100

CHECK AMOUNT

\$600.00

TO THE ORDER OF  
SCMCEED  
DBA S-RESA  
P O Box 18859  
Hattiesburg, MS 39404*Dennis Dug Kamelach*

THE REVERSE SIDE OF THIS DOCUMENT INCLUDES AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

008141 062201559 0054587018