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Applicant Form Identifier PSG20122

Block 1: Header Information

Need Help?

1. Billed Entity Name WEST OAKLANE CHARTER SCHOOL	2. Billed Entity Number 209890	3. Service Provider Identification Number (SPIN) 143024804
Applicant FCC Form 498 ID 443006004		

4. Contact Name	Samuel Tigah
5. Contact Telephone Phone	(215) 927-7995 ext. 164
Contact Fax	(215) 927-7980
Contact Email	stigah@wolcs.org

6. Total Reimbursement Amount
(total from Block 2, Column 14)
 \$ 60541.2

Block 2: Line Item Information Per Funding Request Number

Need Help?

7. FCC Form 471 Application Number (from Funding Commitment Decision Letter)	8. Funding Request Number (FRN) (from Funding Commitment Decision Letter)	9. Bill Frequency	10. Customer Billed Date	11. Shipping date to Customer or Last Day of Work Performed (mm/dd/yyyy)	12. Total (Undiscounted) Amount for Service	13. Discount Rate	14. Discount Amount Billed to USAC (Column 12 multiplied by Column 13)	Approval Status
1) 860335	2342022	ON DELIVERY		7/31/2014	\$ 67268.00	90	\$ 60541.20	COMPLETED

Block 3: Billed Entity Certification

Need Help?

Contact Information for Billed Entity Authorized Person:

By logging into your account using your PIN, checking this box, and clicking the "certify" button at the end of the form, you have electronically signed the form. You are reminded that an electronic signature is the same as a handwritten signature on the form. To see a copy of the Terms and Conditions to which you previously agreed, please click on the "Terms and Conditions" menu above.

Submission Date 8/8/2017

17. Name SAMUEL TIGAH
18. Title/Position I.T. ADMINISTRATOR
20. Address 1 7115 STENTON AVENUE
Address 2
City PHILADELPHIA
State PA
Zip Code 19138 -

19. Phone Number (215) 927-7995 ext. 164
19a. Fax Number (215) 927-7980
19b. Email STIGAH@WOLCS.ORG
19c. Name of Authorized Person's Employer West Oak Lane Charter School

OMB Number 3060 - 0856 Form 472

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Client Service Bureau: 1-888-203-8100

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