



Universal Service Administrative Company

Schools and Libraries Division



Form 472 (BEAR) Notification Letter

March 2, 2016

Tanisha Reed  
Cox Virginia Telcom, LLC  
1400 Lake Hearn Drive  
Atlanta, GA 30319

Re: Invoice Number - as assigned by USAC: 2273833  
Service Provider Identification Number: 143000013  
Reimbursement Form Number: 102615  
Billed Entity Number: 126426

Rik Jowers  
FALLS CHURCH CITY SCH DISTRICT  
800 W BROAD ST STE 203  
FALLS CHURCH, VA 22046

Preferred Mode of Contact: E-mail at [rjowers@fccps.org](mailto:rjowers@fccps.org)  
Total Amount of Reimbursement Approved for Payment: \$0.00

This letter is your notification that the Schools and Libraries Division (SLD) of the Universal Service Administrative Company (USAC) has processed an FCC Form 472, "Billed Entity Applicant Reimbursement (BEAR)" Form from the above named applicant listing you as the service provider. USAC has committed to reimburse the discounted portion of the cost of eligible services provided to eligible entities pursuant to one or more FCC Forms 471, "Description of Services Ordered and Certification Form".

In certain instances, a line may not have been paid. Review the BEAR Letter Applicant Reimbursement Report (Report) following this letter for the reason(s) this may have occurred. For more information about lines that have not been paid, see the explanation of Invoice Error Codes in Step 9 on our website. Work with the applicant (your customer) to correct any errors. Once corrected, your customer may submit a new BEAR to request reimbursement for any unpaid lines.

We recommend using the BEAR Online tool from the Apply Online area or Required Forms section of our website for additional submissions. If a new BEAR cannot be submitted before the invoice deadline passes, you or your customer may submit a request for a deadline extension. (See "Invoice Deadlines and Extension Requests" posted in the SLD section of our website for more information.)

Pursuant to the Federal Communication Commission's (FCC) Second Report and Order and Further Notice of Proposed Rulemaking (FCC 03-101, released April 29, 2003), you must remit the amount shown as "Total Amount of Reimbursement Approved for Payment" above to your customer no later than 20 days after receipt of payment of the approved discounts from USAC. You also agreed not to tender or make use of the payment of the approved discounts issued by USAC to you prior to remitting the discount to your customer (See BEAR Form, Block 4, Service Provider Acknowledgment).

The USAC check should be mailed to the service provider named above within 20 days of the date of this letter.

Schools and Libraries Division - Correspondence Unit  
30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685  
Visit us online at: [www.usac.org/sl](http://www.usac.org/sl)

The maximum remaining amount available for each Funding Request Number (FRN) listed on the Report will be the original commitment less the amount approved herein for reimbursement and less any earlier disbursements to your customer.

PLEASE NOTE: The type of invoice form (BEAR or SPI) for the funding year is established by the receipt and approval of the first invoice submitted for the FRN for the funding year. For example, if we successfully process a BEAR for an FRN, we will not approve a SPI for that same FRN at a later time.

Please see the Guide to Letter Reports posted on our website for an explanation of the items listed in the attached Report.

COMPLETE PROGRAM INFORMATION is posted on our website. You may also contact our Client Service Bureau using the "Submit a Question" link on our website, toll-free by fax at 1-888-276-8736 or toll-free by phone at 1-888-203-8100.

Schools and Libraries Division  
Universal Service Administrative Company

CC: FALLS CHURCH CITY SCH DISTRICT

BEAR NOTIFICATION LETTER APPLICANT REIMBURSEMENT REPORT

Form 471 Application Number: 982457  
Funding Request Number: 2690590  
Funding Year 2014: 07/01/2014 - 06/30/2015  
Contract Number: MTM  
Funding Commitment Decision: \$82464.00  
Reimbursement Amount for this FRN: \$0.00  
Reimbursement Request Decision Explanation:  
Invoice Received Date [02/24/2016] Later Than;

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Form 472 (BEAR) Notification Letter

March 2, 2016

Tanisha Reed  
CoxCom, Inc. dba Cox Communications Northern Virginia  
1400 Lake Hearn Drive  
Atlanta, GA 30319

Re: Invoice Number - as assigned by USAC: 2273691  
Service Provider Identification Number: 143024120  
Reimbursement Form Number: 102015  
Billed Entity Number: 126426

Rik Jowers  
FALLS CHURCH CITY SCH DISTRICT  
800 W BROAD ST STE 203  
FALLS CHURCH, VA 22046

Preferred Mode of Contact: E-mail at [rjowers@fccps.org](mailto:rjowers@fccps.org)  
Total Amount of Reimbursement Approved for Payment: \$0.00

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Schools and Libraries Division - Correspondence Unit  
30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685  
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Schools and Libraries Division  
Universal Service Administrative Company

CC: FALLS CHURCH CITY SCH DISTRICT

BEAR NOTIFICATION LETTER APPLICANT REIMBURSEMENT REPORT

Form 471 Application Number: 970621  
Funding Request Number: 2642437  
Funding Year 2014: 07/01/2014 - 06/30/2015  
Contract Number: MTM  
Funding Commitment Decision: \$369.55  
Reimbursement Amount for this FRN: \$0.00  
Reimbursement Request Decision Explanation:  
    Invoice Received Date [02/22/2016] Later Than;

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Form 472 (BEAR) Notification Letter

March 2, 2016

Tanisha Reed  
CoxCom, Inc. dba Cox Communications Northern Virginia  
1400 Lake Hearn Drive  
Atlanta, GA 30319

Re: Invoice Number - as assigned by USAC: 2273750  
Service Provider Identification Number: 143024120  
Reimbursement Form Number: 102215  
Billed Entity Number: 126426

Rik Jowers  
FALLS CHURCH CITY SCH DISTRICT  
800 W BROAD ST STE 203  
FALLS CHURCH, VA 22046

Preferred Mode of Contact: E-mail at [rjowers@fccps.org](mailto:rjowers@fccps.org)  
Total Amount of Reimbursement Approved for Payment: \$0.00

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Schools and Libraries Division  
Universal Service Administrative Company

CC: FALLS CHURCH CITY SCH DISTRICT

BEAR NOTIFICATION LETTER APPLICANT REIMBURSEMENT REPORT



Form 471 Application Number: 970574  
Funding Request Number: 2642222  
Funding Year 2014: 07/01/2014 - 06/30/2015  
Contract Number: MTM  
Funding Commitment Decision: \$1799.95  
Reimbursement Amount for this FRN: \$0.00  
Reimbursement Request Decision Explanation:  
    Invoice Received Date [02/22/2016] Later Than;

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