

SCHOOL ADMINISTRATIVE UNIT #19
11 School Street
Goffstown, NH 03045-1908

Telephone (603) 497-4818 * FAX (603) 497-8425

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Serving the Towns of Dunbarton, Goffstown, and New Boston

May 2, 2002

THIS LETTER IS A CONCURRENT APPEAL TO THE SLD AND THE FCC

Letter of Appeal
Schools and Libraries Division
Box 125-Correspondence Unit
80 South Jefferson Road
Whippany, NJ 07981

FCC
Office of the Secretary
445 12th Street SW
Washington, DC 20554

CC Docket Nos. 96-45 and 97-21

To Whom It May Concern:

We are concurrently appealing to the SLD and the FCC the FCD dated April 24, 2002. This appeal is made concurrently to ensure that we do not miss the filing deadline should a first appeal with the SLD take longer than sixty days. The appeal is for the following site:

- Maple Avenue Elementary School
- Form 471 Application Number 307653
 - FRN 810121
 - Funding Year 2002 (7/1/02-6/30/03)
 - Billed Entity Number 3213
 - Telecommunications Services through CTC Corp.
 - SPIN 143004191

Please be advised that we are appealing the following:

- Funding Commitment Decision: \$0.00 - Contract Violation.
- Funding Commitment Decision Explanation: No contract or legally binding agreement in place when the Form 471 was filed

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List ABCDE

Page 2
School Administrative Unit #19
Appeal Letter

On February 21, 2002, Michele Croteau, our Business Manager, had a conversation with Jeff Beddow, representative of the SLD, regarding the contract date of 7/1/02 that we set on our application. I have enclosed a copy of the confirmation of their correspondence.

Based on that clarifying conversation with Mr. Beddow, we were informed that our application would not face any further problems. Therefore, we are shocked to learn that our precise written intent to enter into a contract with CTC Communications was not enough to satisfy the E-Rate process. In concert with our original intent, we have completed the process with CTC Communications Corp. and have finalized our agreement with CTC that is not normally completed until later in the year. I refer you to the attached documents.

- APPENDIX A: represents how we have routinely done business with CTC in the past (please note the signature date of 6/27/01 for the period 7/1/01-6/30/02),
- APPENDIX B: represents our agreement with CTC beginning 7/1/02-6/30/03

Please let me know if you need any further information to approve our application. I am the contact person for this matter.

Sincerely,



Susan R. Ratnoff
Assistant Superintendent
SAU#19
11 School Street
Goffstown, NH 03045
Phone: (603) 497-4818
Fax: (603) 497-8425
E-mail: sratnoff@goffstown.k12.nh.us

Cc: Dr. Darrell Lockwood, Superintendent of Schools SAU #19
Michele Croteau, Business Manager SAU #19
Ms. Christine Johnson, Account Executive, CTC Communications
File

Encl.

SUPERINTENDENT OF SCHOOLS
SAU #19
11 School Street
Goffstown, NH 03043
Telephone: (603) 497-4818 Fax: (603) 497-8425

Please deliver to:

Jeff Biddow
(Name)

2/1/00
(Date)

(Firm)

978-574-6522
(Fax Number)

(Location)

(Telephone Number)

(File Name)

Total Number of pages including this cover sheet: 2

Nichole Proteau
(Name of Sender)

COMMENTS: g
Faxing this to you as our
email was down.

This Communication is Confidential and is intended to be privileged information between the Superintendent of School #19 and Person/ Persons this fax is addressed to.

If the reader of this message is not the intended recipient, please immediately notify us by telephone, and return the original message to us at the above address via the U.S. Postal Service.

DUNBARTON

GOFFSTOWN

NEW BOSTON

Michele Croteau

To: jbeddow@st.universalservices.org
Cc: Sue Ratnoff
Subject: Service Provider Contract

Jeff - This message did not go through the first time I tried to send it. Hope it works this time.
Michele

Jeff,

As requested, I am sending this email as confirmation of our conversation a few minutes ago. You had asked for clarification regarding the contract date of 7/01/2002 which was entered in our e-rate documentation. To iterate my response; (1) our current contract is with CTC and expires 6/30/2002, (2) although we do not currently have a contract with CTC after 6/30/2002, they were the only respondent to our request for bid information for the e-rate process and therefore it is our intent to enter into a contract with them for our next fiscal year and, (3) our next fiscal year runs 7/1/2002 to 6/30/2003 and it is our intent to contract with a provider (CTC) for the duration of our fiscal year allowing us to stabilize our costs for that timeframe. Additionally, there are several locations, including Mountain View Middle School, Goffstown AREA High School, Maple Ave. Elementary School, and Bartlett Elementary School, which are currently covered by the existing contract and would be covered by the future contract.

I hope this information is sufficient for you to successfully complete the authorization process.

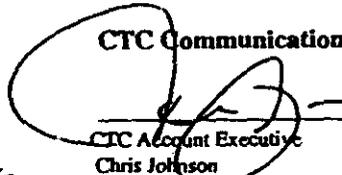
Please email me immediately if you are in need of further clarification or additional information so that we can proceed with authorization.

Thank you in advance for your assistance.
Michele

Michele Croteau, CHA
Business Manager
School Administrative Unit #19
Serving the Districts of
Dunbarton, Goffstown, and New Boston
SAU #19
11 School Street
Goffstown, NH 03045



Application for Service

Installation Information		Billing Information	
Company Name: SAU #19		Bill To: <u>SAME</u>	
Install Address: 11 School Street Goffstown, NH 03045		Billing Address:	
Contact:	Phone:	Contact:	Phone:
E-Mail:	Fax: (603) 497-8425	E-Mail:	Fax:
Credit Information		Credit Information	
<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Tax Exempt (Attach Proof) <input type="checkbox"/> Other		7/1/01 THROUGH 6/30/02 .059 / INTERSTATE .07 / INSTATE	
Nature of Business:			
Years in Business:	SIC:	Tax ID:	Tax Exempt ID(s)
Ownership Information (Required for Partnerships, Proprietorships and Small Businesses)			
Name	Address	Phone	SS#
Reference Information (2 Major Trade Refs and Bank)			
Trade Name	City, State	Phone	Account #
Bank Name	Contact	Account #	
Customer hereby authorizes CTC to perform any investigation necessary to determine the credit worthiness of the Company. CTC reserves the right to deny service or otherwise require a deposit as a condition of service from any applicant whose credit history is found to be unsatisfactory. CTC's Acceptance of this Application for Service is contingent upon Customer's execution of CTC's standard Service Agreement.			
Accepted:		CTC Communications Corp.	
Customer		 Date: <u>6/27/01</u>	
Authorized Representative <u>Chuck Gates</u> Title: <u>Business Manager</u> Date: <u>6/27/01</u>		CTC Account Executive Chris Johnson CTC Branch Manager Date:	

EXISTING



LETTER OF AUTHORIZATION PREFERRED CARRIER SELECTION FORM

The Customer's signature below confirms that for each of the phone numbers associated with those Billing Telephone Numbers identified on the Customer's Local and Long Distance Services Addendum:

- a) Customer selects CTC Communications Corp. (CTC) as its primary provider of
 local exchange service intraLATA toll service long distance service ; that
b) Customer designates CTC as its agent for purposes of changing primary service provider(s); that
c) Customer understands that the selection of a new intraLATA toll or InterLATA service provider may result in the imposition of a charge by Customer's local exchange company for changing service providers; that
d) Customer understands that only one service provider can be designated as the primary carrier for each of the service(s) selected above; and
e) Customer is the Customer of record of other individual authorized to select the provider for the service(s) indicated above

. 07. instl
. 059. instl

[Signature]
Authorized Signature

Name: _____
Title: _____ Date: _____

AUTHORIZATION TO ACCESS CUSTOMER CONFIDENTIAL INFORMATION

Authorization of CTC's Use of Customer Proprietary Network Information (CPNI). Under Section 222 of the Telecommunications Act (the "act") a customer has the right, and the carrier, an obligation, to protect the confidentiality of CPNI. CPNI includes, but is not limited to, customer account information pertaining to usage, calling plans and other pre-subscribed products and services. The Act also restricts a carrier from accessing CPNI absent customer's approval for purposes other than the provisioning of service. The parties recognize that access to such information will assist CTC in determining those CTC products and services which best suit Customer specific telecommunications needs. Therefore, during the term of the Customer's Agreement, Customer's signature below authorizes CTC to access Customer's account information. Except as may be required by law, CPNI shall not be disclosed to any third (3rd) party without Customer's express written consent.

While pre-subscribed to CTC's services (or until such other time as I otherwise affirmatively revoke or limit), I hereby authorize CTC to access my CPNI.

[Signature]
Authorized Signature

Name: _____
Title: _____ Date: _____

LETTER OF AUTHORIZATION PREFERRED CARRIER FREEZE

The Customer's signature below confirms that for each of the telephone numbers associated those Billing Telephone Numbers identified on the Customer's Local and Long Distance Services Addendum:

- a) that Customer has selected CTC as its primary provider and elects to impose a preferred carrier freeze for each of the following services:
 local exchange service intraLATA toll service long distance service
b) that Customer designates CTC as its agent for purposes of implementing the preferred carrier freeze; that
c) Customer acknowledges that implementation of the preferred carrier freeze may result in a charge; that
d) Customer understands that Customer will be unable to make a change in its carrier selection unless she or he lifts the preferred carrier freeze; that
e) CTC will not process any request received from any 3rd party on behalf of Customer to lift the preferred carrier freeze.

[Signature]
Authorized Signature

Name: _____
Title: _____ Date: _____

APPENDIX B

SCHOOL ADMINISTRATIVE UNIT # 19

APPEARANCE



Application for Service

Installation Information				Billing Information			
Company Name: Goffstown High School and SAU #19				Bill To: Goffstown High School			
Install Address: (Goffstown Area High School, 27 Wallace Road Mountain View Middle School, Goffstown, NH 03045 Maple Avenue Elementary School, Bartlett Elementary School)				Billing Address: 27 Wallace Road Goffstown, NH 03045			
Contact:	Michelle Croteau	Phone:	(603) 497-4841	Contact:	Michelle Croteau	Phone:	(603) 497-4841
E-Mail:	ContactEmail	Fax:	ContactFax	E-Mail:	ContactEmail	Fax:	ContactFax
Credit Information ON FILE							
<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Tax Exempt (Attach Proof) <input type="checkbox"/> Other							
Nature of Business: School District : Credit Information on File							
Years in Business:		SIC:	0000	Tax ID:	00-0000000	Duns #	000-000000
Ownership Information (Required for Partnerships, Proprietorships and Small Businesses)							
Name	Address		Phone	SS#			
Reference Information (List 3 Major Trade References and Your Bank)							
Trade Name	City, State		Phone:	Account #:			
Bank							
Contracted Service: 7-1-2002 - 6/30/2003							
Bank Name:		Bank Contact:			Account Number:		
Customer hereby authorizes CTC to perform any investigation necessary to determine the credit worthiness of the Company. CTC reserves the right to deny service or otherwise require a deposit as a condition of service from any applicant whose credit history is found to be unsatisfactory. CTC's Acceptance of this Application for Service is contingent upon Customer's execution of CTC's standard Service Agreement.							
Accepted: Customer				CTC Communications Corp.			
 Authorized Representative Michelle Croteau				 CTC Account Executive Date: May 2, 2002			
 Title: ContactTitle				CTC Branch Manager Date: May 2, 2002 Landy Labonte			
Date: May 2, 2002							



Customer Authorizations

LETTER OF AUTHORIZATION PREFERRED CARRIER SELECTION FORM

The Customer's signature below confirms that for each of the phone numbers associated with those Billing Telephone Numbers identified on the Customer's Local and Long Distance Services Addendum:

- a) Customer selects CTC Communications Corp. (CTC) as its primary provider of:
 local exchange service intraLATA toll service long distance service; that
- b) Customer designates CTC as its agent for purposes of managing primary carrier provider(s); that
- c) Customer understands that the selection of a new intraLATA toll or InterLATA service provider may result in the imposition of a charge by Customer's local exchange company for changing service provider(s); that
- d) Customer understands that only one service provider can be designated as the primary carrier for each of the service(s) selected above; and that
- e) Customer is the Customer of record of other individual authorized to select the provider for the service(s) indicated above

Michelle M. Croteau
Authorized Signature

Name: Michelle Croteau

Title: Assistant Superintendent BUSINESS MANAGER Date: 5/2/02

AUTHORIZATION TO ACCESS CUSTOMER'S CONFIDENTIAL INFORMATION

Authorization of CTC's Use of Customer Proprietary Network Information (CPNI). Under Section 222 of the Telecommunications Act (the "Act") a customer has the right, and the carrier, an obligation, to protect the confidentiality of CPNI. CPNI includes, but is not limited to, customer account information pertaining to usage, calling plans and other purchased products and services. The Act also restricts a carrier from accessing CPNI absent customer's approval for purpose other than the provisioning of service. The parties recognize that access to such information will assist CTC in determining those CTC products and services which best suit Customer specific telecommunications needs. Therefore, during the term of the Customer's Agreement, Customer's signature below authorizes CTC to access Customer's account information. Except as may be required by law, CPNI shall not be disclosed to any third (3rd) party without Customer's express written consent.

While subscribed to CTC's services (or until such other date as I otherwise affirmatively revoke or limit), I hereby authorize CTC to access my CPNI.

Michelle M. Croteau
Authorized Signature

Name: Michelle Croteau

Title: Assistant Superintendent BUSINESS MANAGER Date: 5/2/02

LETTER OF AUTHORIZATION PREFERRED CARRIER FREEZE

The Customer's signature below confirms that for each of the telephone numbers associated those Billing Telephone Numbers identified on the Customer's Local and Long Distance Services Addendum:

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 local exchange service intraLATA toll service long distance service; that
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- c) Customer acknowledges that implementation of the preferred carrier freeze may result in a charge; that
- d) Customer understands that Customer will be unable to make a change in its carrier selection unless she or he lifts the preferred carrier freeze; that
- e) CTC will not process any request received from any 3rd party on behalf of Customer to lift the preferred carrier freeze.

Michelle M. Croteau
Authorized Signature

Name: Michelle Croteau

Title: Contact Title BUSINESS MANAGER Date: 5/2/02