CLOVIS
UNIFIED
SCHOOL DISTRICT

DOCKET FILE COPY ORIGINAL

RECEIVED & INSPECTED
MAY 5 2003
FCC - MAILROOM

April 30, 2003

1450 HERNDON AVENUE
CLOVIS, CA 93611-0599
559.327.9000
www.clovisusd.k12.ca.us

Federal Communications Commission (FCC)
Office of the Secretary
9300 East Hampton Drive
Capitol Heights, MD 20743

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Re: CC Docket Nos. 96-45 and 97-21

To Whom It May Concern:

I am writing in reference to a Decision on Appeal – Funding Year 2002/2003. The decision was made to deny in full.

I had submitted my request for appeal stating my error of using the incorrect application number. I am attaching copies of everything I have submitted.

In the letter dated March 6, 2003 with the decision to deny the application in full there is some incorrect information. I do admit this has been a very confusing situation, but the second statement saying I responded to that FCC Form 470 application number 710800000368937 was used for bidding these services is incorrect. That was my point of this entire appeal. The correct application number is 446460000409355.

I would greatly appreciate you taking the time to once again review my information. I do understand it is my responsibility to gather the correct information and transfer that information to the next application process and met each deadline, but I also understand I am not perfect and made a mistake.

Thank you very much for your assistance. Please contact me at 559-327-9050 if you have any questions.

Sincerely,

Pam Viar
Supervisor of Accounting

No. of Copies rec'd 0

Universal Service Administrative Company
Schools & Libraries Division

Administrator's Decision on Appeal - Funding Year 2002-2003

March 6, 2003

Pam Viar
Clovis Unified School District
1450 Herndon Avenue
Clovis, CA 93611-0599

Re:	Billed Entity Number:	144027
	471 Application Number:	320217
	Funding Request Number(s):	849110, 849698
	Your Correspondence Dated:	July 8, 2002

After thorough review and investigation of all relevant facts, the Schools and Libraries Division ("SLD") of the Universal Service Administrative Company ("USAC") has made its decision in regard to your appeal of SLD's Year 2002 Funding Commitment Decision for the Application Number indicated above. This letter explains the basis of SLD's decision. The date of this letter begins the 60-day time period for appealing this decision to the Federal Communications Commission ("FCC"). If your letter of appeal included more than one Application Number, please note that for each application for which an appeal is submitted, a separate letter is sent.

Funding Request Number: 849110, 849698
Decision on Appeal: **Denied in full.**
Explanation:

- In your letter of appeal you have stated that the FCC Form 470 application number you referenced, 710800000368937, on the Form 471 was the incorrect one. On appeal you have acknowledged that this Form 470 number is incorrect and have provided the correct FCC Form 470 number.

- During the review process you were asked which FCC Form 470 was used to establish bidding for these services and you responded that FCC Form 470 application number 710800000368937. This FCC Form 470 did not post for Internet access services, which you requested on your Form 471.

- Program rules state, that in order to be considered for funding, an applicant must reference a valid FCC Form 470 on the Form 471 for the services they are

requesting. It is the responsibility of the applicant to fill out all forms correctly and submit them on time.

- Since the FCC Form 470, application number 710800000368937, you referenced on the Form 471 did not post for Internet access. The appeal will be denied.

If you believe there is a basis for further examination of your application, you may file an appeal with the Federal Communications Commission (FCC) via United States Postal Service: FCC, Office of the Secretary, 445-12th Street SW, Washington, DC 20554. If you are submitting your appeal to the FCC by other than United States Postal Service, check the SLD web site for more information. Please reference CC Docket Nos. 96-45 and 97-21 on the first page of your appeal. **The FCC must RECEIVE your appeal WITHIN 60 DAYS OF THE ABOVE DATE ON THIS LETTER for your appeal to be filed in a timely fashion.** Further information and new options for filing an appeal directly with the FCC can be found in the "Appeals Procedure" posted in the Reference Area of the SLD web site, www.sl.universalservice.org.

We thank you for your continued support, patience, and cooperation during the appeal process.

Schools and Libraries Division
Universal Service Administrative Company

FCC
Sec of Sec
9300 East Hampton Dr
Capitol Heights, MD
20743

Original 470

FCC Form 470

Do not write in this area.

Approval by OMB
3060-0806

Schools and Libraries Universal Service
Description of Services Requested and Certification Form 470

Estimated Average Burden Hours Per Response: 4 hours

This form is designed to help you describe the eligible telecommunications-related services you seek so that this data can be posted on the Fund Administrator Web Site and interested service providers can identify you as a potential customer and compete to serve you.

Please read instructions before beginning this application. (You can also file online at www.sl.universalservice.org)

Applicant's Form Identifier: CUSDyear5internet
(Create your own code to identify THIS Form 470)

Block 1: Applicant Address and Identifications

1 Name of Applicant (30 characters max.)

2 Funding Year: July 1, 2002 through June 30, 2003

3 Your Entity Number (up to 10 digits) 144027

4a Street Address, P.O. Box, or Route Number: 1450 Herndon Ave.

City: Clovis State: CA Zip Code: 93611 -

b Telephone Number (10 digits + ext.) (559) 327-9050 ext.

c Fax Number (10 digits) (559) 327-9059

d E-mail Address (50 characters max.) pamviar@clovisusd.k12.ca.us

5 Type of Applicant
- [ ] Library (including library system, library branch, or library consortium applying as a library)
- [ ] Individual School (individual public or non-public school)
- [x] School District (LEA; public or non-public [e.g., diocesan] local district representing multiple schools)
- [ ] Consortium (intermediate service agencies, states, state networks, special consortia)

6a Contact Person's Name Pam Viar

*First, fill in **every** item of the Contact Person's information below **that is different from item 4, above.***
***Then** check the box next to the preferred mode of contact. (At least one box **MUST** be checked.)*

b [ ] Street Address, P.O. Box, or Route Number

City State Zip Code - -

c [ ] Telephone Number (10 digits + ext.) ( ) - ext.

d [ ] Fax Number (10 digits) ( ) -

e [ ] E-mail Address (50 characters max.)

Block 2: Summary Description of Needs or Services Requested

7 **This Form 470 describes (check all that apply):**

a [ ] Tariffed services -- telecommunications services, purchased at regulated prices, for which the applicant has no signed, written contract. A new Form 470 must be filed for tariffed services for each funding year.

b [x] Month-to-month services for which the applicant has no signed, written contract. A new Form 470 must be filed for these services for each funding year.

c [ ] Services for which a new written contract is sought for the funding year in Item 2.

d [ ] A multi-year contract signed on or before 7/10/97 but for which no Form 470 has been filed in a previous program year.

NOTE: Services that are covered by a signed, written contract executed pursuant to posting of a Form 470 in a previous program year OR a contract signed on/before 7/10/97 and reported on a Form 470 in a previous year as an existing contract do NOT require filing of a Form 470.

Entity Number 144027 | Applicant's Form Identifier CUSDyear5internet
Contact Person Pam Viar | Phone Number 559-327-9050

What kinds of service are you seeking: Telecommunications Services, Internet Access, or Internal Connections? Refer to the Eligible Services List at www.sl.universalservice.org for examples. Check the relevant category or categories (8, 9, and/or 10 below), and answer the questions in each category you select.

8 ☐ Telecommunications Services

Do you have a Request for Proposal (RFP) that specifies the services you are seeking?

a ☐ **YES,** I have an RFP. It is available on the Web at _____
or via (check one) ____ the Contact Person in Item 6 or ___ the contact listed in Item 11.

b ☐ **NO,** I do not have an RFP for these services.

If you answered NO, you must list below the Telecommunications Services you seek. Specify each ***service or function*** (e.g., local voice service) and quantity and/or capacity (e.g., *20 existing lines plus 10 new ones*). See the Eligible Services List at www.sl.universalservice.org for examples of eligible Telecommunications Services, and remember that only common carrier telecommunications companies can provide these services under the universal service support mechanism. Add additional pages if needed.

Service or Function	Quantity and/or Capacity

9 ☒ Internet Access

Do you have a Request for Proposal (RFP) that specifies the services you are seeking?

a ☒ **YES,** I have an RFP. It is available on the Web at _____
or via (check one) X the Contact Person in Item 6 or ___ the contact listed in Item 11, below.

b ☐ **NO,** I do not have an RFP for these services.

If you answered NO, you must list below the Internet Access services you seek. Specify each service or function (*e.g., monthly* Internet service) and quantity and/or capacity (e.g., for 500 users). See the *Eligible Services List* at www.sl.universalservice.org for examples of eligible Internet Access services. Add additional pages if needed.

Service or Function	Quantity and/or Capacity

10 ☐ Internal Connections

Do you have a Request for Proposal (RFP) that specifies the services you are seeking?

a ☐ **YES,** I have an RFP. It is available on the Web at _____
or via (check one) ____ the Contact Person in Item 6 or ___ the contact listed in Item 11, below.

b ☐ **NO,** I do not have an RFP for these services.

If you answered NO, you must list below the Internal Connections services you seek. Specify each service or function (e.g., local area network) and ***quantity and/or capacity (e.g., connecting 10 rooms and 300 computers at 56kps or better).*** See the Eligible Services List at www.sl.universalservice.org for examples of eligible Internal Connections services. Add additional pages if needed.

Service or Function	Quantity and/or Capacity

Entity Number 144027 Applicant's Form Identifier CUSDyear5internet
Contact Person Pam Viar Phone Number 559-327-9050

11 *(Optional) Please name the person on your staff or project who can provide additional technical details or answer specific questions from service providers about the services you are seeking. This need not be the contact person listed in Item 6 nor the signer of this form.*

Name Bill Cook Title Director of Technology

Telephone Number (10 digits + ext.) (559)327-9600 ext

Fax Number (10 digits) (559) 327-9059

E-mail Address (50 characters max.) billcook@clovisusd.k12.ca.us

12 ☐ Check here if there are any restrictions imposed by state or local laws or regulations on how or when providers may contact you or on other *bidding procedures. Please* describe below any such restrictions or procedures, and/or provide a Web address where they are posted and provide a contact name and telephone number for service providers without Internet access.

13 *(Optional)* Purchases in future years: If you have plans to purchase additional services *in future years*, or expect to seek new *contracts* for existing services, summarize below (including the likely time-frames).

Block 3: Technology Assessment

14 ☐ **Basic telephone service only:** If your application is for *basic local and long* distance *voice telephone* service only, check this box and skip to Item 16.

15 *Although the following* services and facilities are ineligible for support, they are usually necessary to make effective use of the eligible services requested in this application. Unless you indicated in Item 14 that your application is ONLY for basic *telephone service, you* must check at least one box in (a) through (e). You may provide details for purchases being sought.

a Desktop software: Software required ☐ has been purchased; and/or ☐ is being sought.

b Electrical systems: ☐ adequate electrical *capacity is in place or has already* been arranged; and/or ☐ upgrading for electrical capacity is being sought.

c Computers: a sufficient quantity of computers ☐ has been purchased; and/or ☐ is being sought.

d Computer hardware maintenance: *adequate arrangements* ☐ *have* been made; and/or ☐ are being sought.

e Staff development: ☐ all staff have had an appropriate level of training/additional training has already been scheduled; and/or ☐ training is being sought.

f Additional details: *Use this space to provide* additional details to help providers to identify the services you desire.

Entity Number 144027	Applicant's Form Identifier CUSDyear5internet
Contact Person Pam Viar	Phone Number 559-327-9050

Block 4: Recipients of Service

16 Eligible Entities That Will Receive Services:

Check the ONE choice that best describes this application and the eligible entities that will receive the services described in this application. You will then list in Item 17 the entity/entities that will pay the bills for these services.

a ○ **Individual school or single-site library.**

b ○ **Statewide application for (enter 2-letter state code)** [ ] **representing (check all that apply):**

- ☐ All public schools/districts in the state.
- ☐ All non-public schools in the state.
- ☐ All libraries in the state

Does your statewide application include INELIGIBLE entities? ☐ No ☐ Yes. If yes, complete Item 18.

c ⊗ **School district, library system, or consortium application to serve multiple eligible sites:**

Number of eligible sites	38
For these eligible sites, please provide the following:	
Area Codes (list each unique area code)	Prefixes associated with each area code (first 3 digits of phone number)
559	327

Does your application include any INELIGIBLE entities? ☒ No ☐ Yes. If yes, complete Item 18.

17 Billed Entities

List the entity/entities that will be paying the bills directly to the provider for the services requested in this application. These are known as Billed Entities. At least one line of this item must be completed. Attach additional sheets if necessary.

Entity	Entity Number
Clovis Unified Sch. Dist.	144027

18 Ineligible Participating Entities: Does your application also seek bids on services to entities that are not eligible for the Universal Service Program? If so, list those entities here (attach pages if needed):

Ineligible Participating Entity	Area Code and Prefix

Entity Number 144077 | Applicant's Form Identifier CUSDyear5internet
Contact Person Pam Viar | Phone Number 559-327-9050

Block 5: Certification and Signature

19 The applicant includes: (Check one or both.)

a [X] schools under the statutory definitions of elementary and secondary schools found in the Elementary and Secondary Education Act of 1965, 20 U.S.C. Secs. 8801(14) and (25), that do not operate as for-profit businesses, and do not have endowments exceeding $50 million; and/or

b [ ] libraries or library consortia eligible for assistance from a State library administrative agency under the Library Services and Technology Act of 1996 that do not operate as for-profit businesses and whose budgets are completely separate from any school (including, but not limited to elementary and secondary schools, colleges, and universities).

20 All of the individual schools, libraries, and library consortia receiving services under this application are covered by:

a [X] individual technology plans for using the services requested in the application; and/or
b [ ] higher-level technology plans for using the services requested in the application; or
c [ ] no technology plan needed; application requests basic local and long distance telephone service only.

21 Status of technology plans (if representing multiple entities with mixed technology plan status, check both a and b):

a [X] technology plan(s) has/have been approved by a state or other authorized body.
b [ ] technology plan(s) will be approved by a state or other authorized body.
c [ ] no technology plan needed; application requests basic local and long distance telephone service only.

22 I certify that the services the applicant 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.

23 I recognize that support under this support mechanism is conditional upon the school(s) or library(ies) I represent securing access to all of the resources, including computers, training, software, maintenance, and electrical connections necessary to use the services purchased effectively.

24 I certify that I am authorized to submit this request on behalf of the above-named entities, that I have examined this request, and to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

25 Signature Pam Viar | **26** Date 12/10/01

27 Printed name of authorized person Pam Viar

28 Title or position of authorized person Supervisor of Accounting

29 Telephone number of authorized person: (559) 327-9050 ext. _____

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 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.

SLD Problem Resolution <SLDProblemResolution@ncs.com>

To: "PamViar@clovisusd.k12.ca.us" <PamViar@clovisusd.k12.ca.us>
cc:
Subject: RE: Form 470 - FY5 - Case # 109897

02/27/02 03:13 PM

The correction that I am needing is for the application for the Clovis Unified School District. On Block 4 Item 17 you left this blank for this application.

-----Original Message-----
From: PamViar@clovisusd.k12.ca.us [mailto:PamViar@clovisusd.k12.ca.us]
Sent: Wednesday, February 27, 2002 4:23 PM
To: SLD Problem Resolution
Subject: Re: Form 470 - FY5 - Case # 109897

I am trying to get this information to you today. I do not see where a correction is needed in Block 4 Item 17. Is that for sierra Vista Elem School - entity number 107329?

SLD Problem Resolution <SLDProblemResolution@ncs.com>

To: "'pamviar@clovisusd.k12.ca.us'" <pamviar@clovisusd.k12.ca.us>
cc:
Subject: Form 470 - FY5 - Case # 109897

02/27/02 06:09 AM

We are making this contact with you to obtain the necessary information to successfully data enter your Form 470 Services Requested and Certification Form. Here is the information we need from you so that we may complete data
entry of your application for E-Rate Discounts:

I am needing corrections to the Form 470 FY5 applicant identifier CUSDyear5internet. I am needing corrections to Block 4 Item 17 and to Block
5 Item 20. Please make the corrections and fax them to Attention Sherry Wolford Case # 109897 at 888-276-8736 or you may contact me at 888-203-8100.

We need to receive this information from you within 7 calendar days of this communication with you. If we do not receive the requested information from
you within this time frame, your Form 470 application will be rejected and

CLOVIS
UNIFIED
SCHOOL DISTRICT
Accounting Department
1450 Herndon Avenue
Clovis, CA 93611-0599
(559)327-9000
(559)327-9059 FAX

TO: 2-27-02 Sherry Wolford

FROM: Pam Viar

SUBJECT: Case # 109897

DATE:

FAX#: 888-276-8736

PAGES (including cover sheet): 3

USAC

Universal Service Administrative Company
Schools & Libraries Division

FORM 470--Receipt Notification Letter

(Funding Year 5: 07/01/2002--06/30/2003)

March 04, 2002

CLOVIS UNIFIED SCHOOL DISTRICT
PAM VIAR
1450 HERNDON AVE
CLOVIS, CA 93611

Re: Applicant's Form Identifier: CUSDYEARLINTERNET
Form 470 Application Number: 446460000409355 correct App.#
Entity Number: 144027
Date Form 470 Posted: 02/28/2002
Allowable Vendor Selection/Contract Date: 03/28/2002

Dear Applicant:

We are pleased to inform you that the Schools and Libraries Division (SLD) has received your FCC Form 470, "Description of Services Requested and Certification Form," complete with your signed certification. The posting date is noted above. This letter provides important information about the processing of your Form 470 application. Please read this letter carefully and retain it for your records and future reference.

The Form 470 Application Number listed above has been assigned by the SLD and will be used to track your Form 470. This number must be provided on each FCC Form 471, the "Services Ordered and Certification Form," that cites this Form 470. Any applicant who relies on this Form 470 will need to know this Form 470 Application Number. You may wish to share this number with those schools and/or libraries featured in this application to assist them in their preparation of Form 471.

FCC rules require that requests for tariff or month-to-month services and requests for new contractual services be posted on the SLD web site for a period of 28 days before selecting a vendor, to provide for a competitive bidding process. State or local laws may require a longer procurement cycle. This 28-day waiting period must occur before you may execute any contracts for contracted services, before you select your vendor for tariff or month-to-month services, and before you sign and submit your Form 471. In addition, if you are seeking support for the first time for services delivered under a multi-year contract signed on or before July 10, 1997, the SLD cannot process your Form 471 until the 28-day waiting period has elapsed.

The date that contracts can be executed for contracted services or that selection can be made for a vendor providing tariff or month-to-month services is listed above as the "Allowable Vendor Selection/Contract Date."

For information about the filing window for FCC Form 471 for discounts on services to be rendered on or between July 1, 2002, and June 30, 2003, check the Schools and Libraries web site at <http://www.sl.universalservice.org>. Information about the filing window will be posted when it becomes available.

It is important to remember that not all requested services will necessarily be approved for discounts. Your FCC Form 471, the "Services Ordered and Certification Form" will be subject to review by the SLD for a determination of funding eligibility before funds are committed. (This review will consider all program rules including eligibility of discount recipients and the eligibility of services for which discounts are requested.) In addition, availability of funds will be a factor in funding decisions. Therefore, you should consider the possibility of a denial of funding or a level of funding below your request, and include appropriate contingencies in contracts for any or all of the requested services.

Thank you for your interest in the Schools and Libraries program. If you have any questions, please call the SLD Client Service Bureau at 1-888-203-8100.

Schools and Libraries Division
Universal Service Administrative Company

HOME CANCEL SAVE & EXIT HELP

Internet

FCC Form 471

Services Ordered and Certification Form

SLD

Block 2 & 3 Block 4 Block 5 Block 6

Applicant's Form Identifier: YR5INTERNET

Entity Number: 144027

Contact Person: Pam Viar

Phone Number: (559) 327-9000

IMPORTANT

Please record this application's information in a secure place for future reference

471 Application Number: 320217
Entity Number of Billed Entity (Applicant): 144027
Security Code Number: 76572

Continue >>

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HOME CANCEL HELP

FCC Form 471

Services Ordered and Certification Form

Block 2 & 3 | Block 4 | Block 5 | Block 6

Approval by OMB 30600806 Estimated Average Burden Hours Per Response: 4 hours

This form asks schools and libraries to list the eligible telecommunications-related services they have ordered and estimate the annual charges for them so that the Fund Administrator can set aside sufficient support to reimburse providers for services.

Please read instructions before beginning this application.

Applicant's Form Identifier:
(Insert your own code to identify THIS Form 471)
YR5INTERNET

Form 471 Application #:
(inserted by Administrator)
320217

Block 1: Billed Entity Information

(The "Billed Entity" is the entity paying the bills for the services listed on this form.)

1. Name of Billed Entity
CLOVIS UNIFIED SCHOOL DISTRICT

2. Funding Year:
Year 5 (07/01/2002 - 06/30/2003)

3. Entity Number
144027

4. Billed Entity (Applicant) Address, etc.

a. Street Address, P.O. Box, or Route Number
1450 HERNDON AVE

City: CLOVIS
State: CA
Zip Code + 4: 93611 - 0567

b. Telephone Number (10 digits + extension)
(559) 327 - 9000

c. Fax Number (10 digits)
(559) 327 - 9059

d. E-mail Address (50 characters max.)
pamviar@clovisusd.k12.ca.us

5. Type Of Application ***(Select only one type)***

- School (public or nonpublic school)
- School District (LEA; public or nonpublic (e.g., diocesan) local district representing multiple schools)
- Library (library (i.e. outlet/branch, system))
- Consortium

If you selected "Consortium" in #5 above, check here if any members are ineligible nongovernmental entities.

6a. Contact Person's Name:
Pam Viar

Copy 4a-d above to 6b-e below

Fill in every item of the Contact Person's information below that is different from Item 4 above, then select your preferred mode of contact.

6b. Street Address, P.O.Box, or Route Number

1450 HERNDON AVE	
City: CLOVIS	State: CA / Zip Code + 4: 93611 - 0567
6c. Telephone Number (10 digits + ext.)	(559) 327 - 9000 ext.
6d. Fax Number (10 digits)	(559) 327 - 9059
6e. **E-mail Address (50 characters max.)**	pamviar@clovisusd.k12.ca.us
6f. Holiday/vacation/summer contact information	

Previous | Reset Page | Block 2 & 3 | Print Preview

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HOME CANCEL SAVE & EXIT HELP

FCC Form 471

Services Ordered and Certification Form

SLD

Block 1 Block 4 Block 5 Block 6

Applicant's Form Identifier: YR5INTERNET **Entity Number: 144027**

Contact Person: Pam Viar **Phone Number: (559) 327-900**

Block 2: Minor Modification to Existing Contract?

7. THIS ITEM CANNOT BE FILED ONLINE. You may use this item ONLY to inform the Fund Administrator if your request represents a minor modification, such as a modification of services, to a Form 471 for which you already have a Receipt Acknowledgement Letter. Minor modification requests can be filed MANUALLY only. For more information, check the SLD web site at www.sl.universalservice.org or call the SLD Client Service Bureau at 888-203-8100.

Block 3: Impact of Services Ordered in THIS Application

8. Please provide your best estimate of the number of people who will be served by all of the services ordered in THIS Form 471. Schools/school districts complete 8a. Libraries complete 8b. Consortia complete 8a and/or 8b.

a. Number of students to be served 34620 b. Number of library patrons to be served

9. The following questions seek summary outcome information based on the services ordered in this Form 471 application. Please complete only those rows that are relevant to THIS application.

IF THIS APPLICATION INCLUDES...	Before Order	After Order
a. Telephone service (for schools/school districts/consortia only): How many classrooms had phone service before and after your order?	1757	1807
b. High-bandwidth voice/data/video service: How many buildings served before and after your order?	37	40
c. High-bandwidth voice/data/video service: Highest speed to a building before and after your order?	1.5mb	1.5mb
d. Dial-up Internet connections: How many before and after your order?	14	24
e. Dial-up Internet connections: Highest speed before and after your order?	56kb	56kb
f. Direct connections to the Internet: How many before and after your order?	2	1
g. Direct connections to the Internet: Highest speed before and after your order?	1.5mb	15mb
h. Internet access(for schools): How many rooms have Internet access before and after your order?	1757	1807
i. Internet access(for libraries): How many buildings have Internet access before and after your order?		

j. Internet access: How many computers (or other devices) with Internet access before and after your order?	11562	12000
k. Other technology outcomes?		

Block 1 Reset Page Block 4 Print Preview

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FCC Form 471

Services Ordered and Certification Form

SLD

Block 1 Block 2 & 3 Block 5 Block 6

Applicant's Form Identifier: YR5INTERNET **Entity Number: 144027**

Contact Person: Pam Viar **Phone Number: (559) 327-900**

Bottom

Block 4 Discount Calculation Worksheet A for Schools/School Districts (Display)

Type "A" Worksheet No. 393121

1. Name of School: ENTERPRISE HIGH SCHOOL
2. Entity Number: 107308
3. Urban or Rural: Urban
4. Total # of Students: 133
5. # of Students Eligible for NS
6. %Students Eligible for NSLP (#5 / #4): 8.270%
7. Discount % from Discount Matrix: 40%
8. Weighted Product (#4 X #7):

1. Name of School: GATEWAY HIGH SCHOOL
2. Entity Number: 107309
3. Urban or Rural: Urban
4. Total # of Students: 378
5. # of Students Eligible for NS 101
6. %Students Eligible for NSLP (#5 / #4): 26.719%
7. Discount % from Discount Matrix: 50%
8. Weighted Product (#4 X #7):

1. Name of School: COX ELEMENTARY SCHOOL
2. Entity Number: 107311
3. Urban or Rural: Urban
4. Total # of Students: 676
5. # of Students Eligible for NS 172
6. %Students Eligible for NSLP (#5 / #4): 25.443%
7. Discount % from Discount Matrix: 50%
8. Weighted Product (#4 X #7):

1. Name of School: CLOVIS HIGH SCHOOL
2. Entity Number: 107312
3. Urban or Rural: Urban
4. Total # of Students: 2604
5. # of Students Eligible for NS 417
6. %Students Eligible for NSLP (#5 / #4): 16.013%
7. Discount % from Discount Matrix: 40%
8. Weighted Product (#4 X #7): 104160

1. Name of School: JEFFERSON ELEMENTARY SCHOOL
2. Entity Number: 107313
3. Urban or Rural: Urban
4. Total # of Students: 622
5. # of Students Eligible for NS 240
6. %Students Eligible for NSLP (#5 / #4): 38.585%
7. Discount % from Discount Matrix: 60%
8. Weighted Product (#4 X #7):

1. Name of School: MIRAMONTE ELEMENTARY SCHOOL
2. Entity Number: 107314
3. Urban or Rural: Urban
4. Total # of Students: 750
5. # of Students Eligible for NS 363
6. %Students Eligible for NSLP (#5 / #4): 48.400%
7. Discount % from Discount Matrix: 60%
8. Weighted Product (#4 X #7):

1. Name of School: GETTYSBURG ELEMENTARY SCHOOL
2. Entity Number: 107315
3. Urban or Rural: Urban
4. Total # of Students: 789
5. # of Students Eligible for NS

205

6. %Students Eligible for NSLP (#5 / #4): 25.982% **7. Discount % from Discount Matrix:** 50% **8. Weighted Product (#4 X #7):**

1. Name of School: CEDARWOOD ELEMENTARY SCHOOL **2. Entity Number:** 107317
3. Urban or Rural: Urban **4. Total # of Students:** 583 **5. # of Students Eligible for NS**
6. %Students Eligible for NSLP (#5 / #4): 11.149% **7. Discount % from Discount Matrix:** 40% **8. Weighted Product (#4 X #7):**

1. Name of School: RED BANK ELEMENTARY SCHOOL **2. Entity Number:** 107318
3. Urban or Rural: Urban **4. Total # of Students:** 542 **5. # of Students Eligible for NS**
6. %Students Eligible for NSLP (#5 / #4): 8.118% **7. Discount % from Discount Matrix:** 40% **8. Weighted Product (#4 X #7):**

1. Name of School: BUCHANAN HIGH SCHOOL **2. Entity Number:** 107319
3. Urban or Rural: Urban **4. Total # of Students:** 2549 **5. # of Students Eligible for NS** 267
6. %Students Eligible for NSLP (#5 / #4): 10.474% **7. Discount % from Discount Matrix:** 40% **8. Weighted Product (#4 X #7):** 101960

1. Name of School: ALTA SIERRA INTERMEDIATE SCH **2. Entity Number:** 107320
3. Urban or Rural: Urban **4. Total # of Students:** 1404 **5. # of Students Eligible for NS** 175
6. %Students Eligible for NSLP (#5 / #4): 12.464% **7. Discount % from Discount Matrix:** 40% **8. Weighted Product (#4 X #7):**

1. Name of School: GARFIELD ELEMENTARY SCHOOL **2. Entity Number:** 107321
3. Urban or Rural: Urban **4. Total # of Students:** 811 **5. # of Students Eligible for NS**
6. %Students Eligible for NSLP (#5 / #4): 6.658% **7. Discount % from Discount Matrix:** 40% **8. Weighted Product (#4 X #7):**

1. Name of School: DRY CREEK ELEMENTARY SCHOOL **2. Entity Number:** 107322
3. Urban or Rural: Urban **4. Total # of Students:** 628 **5. # of Students Eligible for NS**
6. %Students Eligible for NSLP (#5 / #4): 11.305% **7. Discount % from Discount Matrix:** 40% **8. Weighted Product (#4 X #7):**

1. Name of School: COLE ELEMENTARY SCHOOL **2. Entity Number:** 107323
3. Urban or Rural: Urban **4. Total # of Students:** 700 **5. # of Students Eligible for NS** 233
6. %Students Eligible for NSLP (#5 / #4): 33.285% **7. Discount % from Discount Matrix:** 50% **8. Weighted Product (#4 X #7):**

1. Name of School: WELDON ELEMENTARY SCHOOL **2. Entity Number:** 107324
3. Urban or Rural: Urban **4. Total # of Students:** 706 **5. # of Students Eligible for NS** 340
6. %Students Eligible for NSLP (#5 / #4): 48.158% **7. Discount % from Discount Matrix:** 60% **8. Weighted Product (#4 X #7):**

1. Name of School: CLARK INTERMEDIATE SCHOOL **2. Entity Number:** 107325
3. Urban or Rural: Urban **4. Total # of Students:** 1291 **5. # of Students Eligible for NS** 315
6. %Students Eligible for NSLP (#5 / #4):

24.399% | 7. Discount % from Discount Matrix: 50% | 8. Weighted Product (#4 X #7):

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1. Name of School: SIERRA VISTA ELEMENTARY SCHOOL
2. Entity Number: 107329
3. Urban or Rural: Urban
4. Total # of Students: 579
5. # of Students Eligible for NS: 454
6. %Students Eligible for NSLP (#5 / #4): 78.411%
7. Discount % from Discount Matrix: 90%
8. Weighted Product (#4 X #7):

---

1. Name of School: TARPEY ELEMENTARY SCHOOL
2. Entity Number: 107330
3. Urban or Rural: Urban
4. Total # of Students: 799
5. # of Students Eligible for NS: 508
6. %Students Eligible for NSLP (#5 / #4): 63.579%
7. Discount % from Discount Matrix: 80%
8. Weighted Product (#4 X #7):

---

1. Name of School: NELSON ELEMENTARY SCHOOL
2. Entity Number: 107462
3. Urban or Rural: Urban
4. Total # of Students: 602
5. # of Students Eligible for NS: 312
6. %Students Eligible for NSLP (#5 / #4): 51.827%
7. Discount % from Discount Matrix: 80%
8. Weighted Product (#4 X #7):

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1. Name of School: PINEDALE ELEMENTARY SCHOOL
2. Entity Number: 107463
3. Urban or Rural: Urban
4. Total # of Students: 533
5. # of Students Eligible for NS: 348
6. %Students Eligible for NSLP (#5 / #4): 65.290%
7. Discount % from Discount Matrix: 80%
8. Weighted Product (#4 X #7):

---

1. Name of School: MOUNTAIN VIEW ELEMENTARY SCH
2. Entity Number: 107620
3. Urban or Rural: Urban
4. Total # of Students: 727
5. # of Students Eligible for NS: 163
6. %Students Eligible for NSLP (#5 / #4): 22.420%
7. Discount % from Discount Matrix: 50%
8. Weighted Product (#4 X #7):

---

1. Name of School: KASTNER INTERMEDIATE SCHOOL
2. Entity Number: 107621
3. Urban or Rural: Urban
4. Total # of Students: 1527
5. # of Students Eligible for NS: 253
6. %Students Eligible for NSLP (#5 / #4): 16.568%
7. Discount % from Discount Matrix: 40%
8. Weighted Product (#4 X #7):

---

1. Name of School: VALLEY OAK ELEMENTARY SCHOOL
2. Entity Number: 107622
3. Urban or Rural: Urban
4. Total # of Students: 627
5. # of Students Eligible for NS
6. %Students Eligible for NSLP (#5 / #4): 5.901%
7. Discount % from Discount Matrix: 40%
8. Weighted Product (#4 X #7):

---

1. Name of School: FORT WASHINGTON ELEM SCHOOL
2. Entity Number: 107623
3. Urban or Rural: Urban
4. Total # of Students: 708
5. # of Students Eligible for NS
6. %Students Eligible for NSLP (#5 / #4): 7.485%
7. Discount % from Discount Matrix: 40%
8. Weighted Product (#4 X #7):

---

1. Name of School: CLOVIS WEST HIGH SCHOOL
2. Entity Number: 107624
3. Urban or Rural: Urban
4. Total # of Students: 2877
5. # of Students Eligible for NS: 262
6. %Students Eligible for NSLP (#5 / #4):
8. Weighted Product (#4 X #7):

9.106% **7. Discount % from Discount Matrix: 40%** 115080

1. Name of School: LINCOLN ELEMENTARY SCHOOL **2. Entity Number:** 107625
3. Urban or Rural: Urban **4. Total # of Students:** 666 **5. # of Students Eligible for NS** 201
6. %Students Eligible for NSLP (#5 / #4): 30.180% **7. Discount % from Discount Matrix: 50%** **8. Weighted Product (#4 X #7):**

1. Name of School: MAPLE CREEK ELEMENTARY SCHOOL **2. Entity Number:** 107627
3. Urban or Rural: Urban **4. Total # of Students:** 817 **5. # of Students Eligible for NS**
6. %Students Eligible for NSLP (#5 / #4): 10.771% **7. Discount % from Discount Matrix: 40%** **8. Weighted Product (#4 X #7):**

1. Name of School: LIBERTY ELEMENTARY SCHOOL **2. Entity Number:** 107628
3. Urban or Rural: Urban **4. Total # of Students:** 570 **5. # of Students Eligible for NS**
6. %Students Eligible for NSLP (#5 / #4): 7.192% **7. Discount % from Discount Matrix: 40%** **8. Weighted Product (#4 X #7):**

1. Name of School: COPPER HILLS ELEMENTARY **2. Entity Number:** 107629
3. Urban or Rural: Urban **4. Total # of Students:** 958 **5. # of Students Eligible for NS**
6. %Students Eligible for NSLP (#5 / #4): 8.037% **7. Discount % from Discount Matrix: 40%** **8. Weighted Product (#4 X #7):**

1. Name of School: TEMPERANCE-KUTNER ELEM SCHOOL **2. Entity Number:** 107679
3. Urban or Rural: Urban **4. Total # of Students:** 772 **5. # of Students Eligible for NS** 446
6. %Students Eligible for NSLP (#5 / #4): 57.772% **7. Discount % from Discount Matrix: 80%** **8. Weighted Product (#4 X #7):**

1. Name of School: FANCHER CREEK ELEM SCHOOL **2. Entity Number:** 107680
3. Urban or Rural: Urban **4. Total # of Students:** 1002 **5. # of Students Eligible for NS** 614
6. %Students Eligible for NSLP (#5 / #4): 61.277% **7. Discount % from Discount Matrix: 80%** **8. Weighted Product (#4 X #7):**

1. Name of School: CLOVIS EAST HIGH SCHOOL **2. Entity Number:** 160273
3. Urban or Rural: Urban **4. Total # of Students:** 1676 **5. # of Students Eligible for NS** 522
6. %Students Eligible for NSLP (#5 / #4): 31.145% **7. Discount % from Discount Matrix: 50%** **8. Weighted Product (#4 X #7):**

1. Name of School: CENTURY ELEMENTARY **2. Entity Number:** 178518
3. Urban or Rural: Urban **4. Total # of Students:** 781 **5. # of Students Eligible for NS**
6. %Students Eligible for NSLP (#5 / #4): 10.755% **7. Discount % from Discount Matrix: 40%** **8. Weighted Product (#4 X #7):**

1. Name of School: RAYBURN INT. SCHOOL **2. Entity Number:** 201756
3. Urban or Rural: Urban **4. Total # of Students:** 1394 **5. # of Students Eligible for NS** 545
6. %Students Eligible for NSLP (#5 / #4): 39.096% **7. Discount % from Discount Matrix: 60%** **8. Weighted Product (#4 X #7):**

1. Name of School: CLOVIS ELEMENTARY **2. Entity Number:** 212352

3. Urban or Rural: Urban
4. Total # of Students: 601
5. # of Students Eligible for NS 265
6. %Students Eligible for NSLP (#5 / #4): 44.093%
7. Discount % from Discount Matrix: 60%
8. Weighted Product (#4 X #7):

1. Name of School: RIVERVIEW ELEMENTARY
2. Entity Number: 230422
3. Urban or Rural: Urban
4. Total # of Students: 601
5. # of Students Eligible for NS 265
6. %Students Eligible for NSLP (#5 / #4): 44.093%
7. Discount % from Discount Matrix: 60%
8. Weighted Product (#4 X #7):

1. Name of School: GETTYSBURG/LOCAN ELEMENTARY
2. Entity Number: 230425
3. Urban or Rural: Urban
4. Total # of Students: 601
5. # of Students Eligible for NS 265
6. %Students Eligible for NSLP (#5 / #4): 44.093%
7. Discount % from Discount Matrix: 60%
8. Weighted Product (#4 X #7):

Total number of students (#4) for all entities listed in this worksheet: 34584
Total weighted product (#8) for all entities listed in this worksheet: 17351.6
Weighted Average Discount % for Shared Services (#8 total / #4 total X 100) for this worksheet: 50%

Top

Add New Entity | Add New Type "A" Worksheet

Block 2&3 | Remove This Worksheet | Copy This Worksheet | Block 5 | Print Previ

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Block 1 Block 2 & 3 Block 4 Block 6

FCC Form 471

Services Ordered and Certification Form

SLD

Applicant's Form Identifier: YR5INTERNET **Entity Number: 144027**

Contact Person: Pam Viar **Phone Number: (559) 327-9000**

Block 5: Discount Funding Request(s)

Funding Request Number (FRN): (assigned by Administrator)

11. Category of Service (only ONE category should be checked)

● **Telecommunications Service** ● **Internet Access** ● **Internal Connections**

12	Form 470 Application Number (15 digits)	446460000409355 ~~710800003689~~ error
13	SPIN - Service Provider Identification Number (9 digits)	**143004610**
14	Service Provider Name	**Pacific Bell Internet Services**
15	Use Contract Number for contracted services (indicate N/A if not available); use "T" if tariffed services; use "MTM" if month-to-month services.	MTM
16	Billing Account Number (e.g. billed telephone number)	559-327-9000
17	Allowable Vendor Selection/Contract Date (mm/dd/yyyy, based on Form 470 filing)	**11/03/2001**
18	Contract Award Date (mm/dd/yyyy)	03/01/2002
19a	Service Start Date (mm/dd/yyyy)	07/01/2002
19b	Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services)	06/30/2003
20	Contract Expiration Date (mm/dd/yyyy)	

21. Description of This Service: You MUST forward a description of this service on paper, including a

breakdown of components and costs, plus any relevant brand names. Label this paper description with an Attachment #, and note number here:

Attachment # 144027C

22. Entity/Entities Receiving This Service:

a. If the service is site-specific (provided to one site and not shared by others), select the Entity Number of the entity from Block 4 receiving this service:

b. If the service is shared by all entities on a Block 4 worksheet, select the worksheet number:

#393121 · 50%

23. Calculations

a.	Monthly charges (total amount per month for service)	1000.
b.	How much of the amount in (a) is ineligible?	0
f.	Annual non-recurring (one-time) charges	0
g.	How much of the amount in (f) is ineligible?	0

Reset Page

Block 4 | Add New Funding Request | Block 5 Display | Block 6

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107622 **3. Rural/Urban:** Urban
4. Student Count: 627 **5. NSLP Students:** 37 **6. NSLP Students/Students:** 5.901%
7. Discount: 40% **8. Weighted Product:** 250.8

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1. School Name: WELDON ELEMENTARY SCHOOL
2. Entity Number: 107324 **3. Rural/Urban:** Urban
4. Student Count: 706 **5. NSLP Students:** 340 **6. NSLP Students/Students:** 48.158%
7. Discount: 60% **8. Weighted Product:** 423.6

Block 5: Discount Funding Request(s)

FRN: 849110	
11. Category of Service: Internet Access	**12. 470 Application Number:** 710800000368937
13. SPIN: 143004610	**14. Service Provider Name:** Pacific Bell Internet Services
15. Contract Number: MTM	**16. Billing Account Number:** 559-327-9000
17. Allowable Contract Date: 11/03/2001	**18. Contract Award Date:**
19a. Service Start Date: 07/01/2002	**19b. Service End Date:** 06/30/2003
20. Contract Expiration Date:	
21. Attachment #: 144027B	**22. Block 4 Worksheet No.:** 393121
23a. Monthly Charges: $5,166.67	**23b. Ineligible monthly amt.:** $.00
23c. Eligible monthly amt.: $5,166.67	**23d. Number of months of service:** 12
23e. Annual pre-discount amount for eligible recurring charges (23c x 23d): $62,000.04	
23f. Annual non-recurring (one-time) charges: $2,500.00	**23g. Ineligible non-recurring amt.:** $.00
23h. Annual pre-discount amount for eligible non-recurring charges (23f - 23g): $2,500.00	
23i. Total program year pre-discount amount (23e + 23h): $64,500.04	
23j. % discount (from Block 4): 50	
23k. Funding Commitment Request (23i x 23j): $32,250.02	

FRN: 849698	
11. Category of Service: Internet Access	**12. 470 Application Number:** 710800000368937
13. SPIN: 143004610	**14. Service Provider Name:** Pacific Bell Internet Services
15. Contract Number: MTM	**16. Billing Account Number:** 559-327-9000
17. Allowable Contract Date: 11/03/2001	**18. Contract Award Date:**
19a. Service Start Date: 07/01/2002	**19b. Service End Date:** 06/30/2003
20. Contract Expiration Date:	
21. Attachment #: 144027C	**22. Block 4 Worksheet No.:** 393121
23a. Monthly Charges: $1,000.00	**23b. Ineligible monthly amt.:** $.00
23c. Eligible monthly amt.: $1,000.00	**23d. Number of months of service:** 12
23e. Annual pre-discount amount for eligible recurring charges (23c x 23d): $12,000.00	

23f. Annual non-recurring (one-time) charges: $.00	**23g. Ineligible non-recurring amt.:** $.00
23h. Annual pre-discount amount for eligible non-recurring charges (23f - 23g): $0.00	
23i. Total program year pre-discount amount (23e + 23h): $12,000.00	
23j. % discount (from Block 4): 50	
23k. Funding Commitment Request (23i x 23j): $6,000.00	

Block 6: Certifications and Signature

24a. Schools: Y
24b. Libraries or Library Consortia: N

26a. Individual Technology Plan: Y
26b. Higher-Level Technology Plan(s): N
26c. No Technology Plan Needed:

27a. Approved Technology Plan(s): Y
27b. State Approved Technology Plan: N
27c. No Technology Plan Needed:

36. Printed Name of Authorized Person: Pam Viar
37. Title or Position of Authorized Person: Supervisor of Accounting
38. Telephone Number of Authorized Person: (559) 327-9050 ext

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HOME CANCEL HELP

FCC Form 471

Services Ordered and Certification Form

SLD

Applicant's Form Identifier: YR5INTERNET **Entity Number: 144027**

Contact Person: Pam Viar **Phone Number: (559) 327-9000**

Block 6: Certifications and Signature

Do not write in this area

471 Application Number: 320217

24. The entities listed in Block 4 of this application are eligible for support because they are: (check one or both)

a. ☑ schools under the statutory definitions of elementary and secondary schools found in the Elementary and Secondary Education Act of 1965, 20 U.S.C. Secs. 8801(14) and (25), that do not operate as for-profit businesses, and do not have endowments exceeding $50 million; and/or

b. ☐ libraries or library consortia eligible for assistance from a State library administrative agency under the Library Services and Technology Act of 1996 that do not operate as for-profit businesses and whose budgets are completely separate from any school (including, but not limited to) elementary and secondary schools, colleges and universities

25. The eligible schools and libraries listed in Block 4 of this application have secured access to all of the resources, including computers, training, software, maintenance, and electrical connections necessary to make effective use of the services purchased as well as to pay the discounted charges for eligible services.

26. All of the schools and libraries or library consortia listed in Block 4 of this application are covered by:

a. ☑ an individual technology plan for using the services requested in this application; and/or

b. ☐ higher-level technology plan(s) for using the services requested in this application; or

c. ☐ no technology plan needed; applying for basic local distance telephone service only.

27. Status of technology plans (if representing multiple entities with mixed technology plan status, check both a and b):

a. ☑ technology plan(s) has/have been approved; and/or

b. ☐ technology plan(s) will be approved by a state or other authorized body; or

c. ☐ no technology plan needed; applying for basic local and long distance telephone service only.

28. I certify that the entities eligible for support that I am representing have complied with all applicable state and local laws regarding procurements of services for which support is being sought.

29. I certify that the services the applicant 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.

30. I certify that the entity(ies) I represent has 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.

31. 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 service receive an appropriate share of benefits from those services.

32. I recognize that I may be audited pursuant to ths application. I will retain for five years any and all worksheets and other records that I rely upon to fill out this application, and, if audited, will make available to the Administrator such records.

33. I certify that I am authorized to submit this request on behalf of the above-named institution, that I have examined this request, and to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

34. Signature of authorized person Pam Viar	**35.** Date 1-16-02
36. Printed name of authorized person **Pam Viar**	
37. Title or position of authorized person **Supervisor of Accounting**	
38. Telephone number of authorized person **(559) 327- 9050**	

471 Application Number: 320217
CLOVIS UNIFIED SCHOOL DISTRICT
1450 HERNDON AVE
CLOVIS, CA 93611 -0567

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 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.
The Americans with Disabilities Act, the Individuals with Disabilities Education Act and the Rehabilitation Act may impose obligations on entities to make the services purchased with these discounts accessible to and usable by people with disabilities.

NOTICE TO INDIVIDUALS: Section 54.504 of the Federal Communication Commission's rules requires all schools and libraries ordering services that are eligible for and seeking universal service discounts to file this Services Ordered and Certification Form (FCC Form 471) with the Universal Service Administrator. 47 C.F.R. §54.504. The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended, 47 U.S.C. §254. The data in the report will be used to ensure that schools and libraries comply with the competitive bidding requirement contained in 47 C.F.R. §54.504. All schools and libraries planning to order services eligible for universal service discounts must file this form themselves or as part of a consortium.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation of potential violation of a FCC statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party of a proceeding before the body or has an interest in the proceeding.

If you owe a past due debt to the federal government, the taxpayer identification number (such as your social security number) and other information you provide may also be disclosed to the Department of the Treasury Financial Management Service, other federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide this information to these agencies through the matching of computer records when authorized.

With the exception of your social security number, if you do not provide the information we request on the form, the FCC may delay processing of your application or may return your application without action.

The foregoing Notice is required by the Privacy Act of 1974, Pub. L. No. 93579, December 31, 1974, 5 U.S.C. §552, and the Paperwork Reduction Act of 1995, Pub. L. No. 10413, 44 U.S.C. §3501, et seq.

Public reporting burden for this collection of information is estimated to average 6 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of

information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions f reducing the reporting burden to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, D.C. 20554.

Please submit this form to:

SLD - Form 471
P.O. Box 7026
Lawrence, KS 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, mail this form to:

SLD - Form 471
C/O Ms.Smith
3833 Greenway Drive
Lawrence, KS 66046
(888) 203-8100

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USAC

Universal Service Administrative Company
Schools & Libraries Division

FORM 471 RECEIPT ACKNOWLEDGMENT LETTER
(Funding Year 5: 07/01/2002 - 06/30/2003)

February 4, 2002

CLOVIS UNIFIED SCHOOL DISTRICT
Pam Viar
1450 HERNDON AVE
CLOVIS, CA 93611-0567

Re: Form 471 Application Number: 320217
Funding Year 5: 07/01/2002 - 06/30/2003
Applicant's Form Identifier: YR5INTERNET
Billed Entity Number: 144027

NOTICE: This notification is an acknowledgment of RECEIPT and SUCCESSFUL DATA ENTRY of your FCC Form 471, Services Ordered and Certification Form, reflecting $76,500.04 in total program year pre-discount costs for services. This letter confirms that the Form 471 and signed Form 471 Certification have been received.

This letter does NOT contain any decisions concerning your requests for discounts. Note, however, the three-week response deadline described below.

Please keep this letter for your records. The Form 471 application number cited above is critical for you to link your application to future Schools and Libraries Division (SLD) communications.

Please be advised that the last of your Form 471 application materials identified above was postmarked or received by the SLD on 01/16/2002 and successfully entered into our data system. SLD's Program Integrity Assurance (PIA) Team will now review your application for compliance with program rules. Once the review of your application has been completed, you will receive a Funding Commitment Decision Letter(s) to inform you of the disposition of your application. Until you receive a Funding Commitment Decision Letter from the SLD, you cannot assume that you will receive the discounts for which you are applying.

Your application will be considered within the application filing window wherein all applications that meet the Minimum Processing Standards are treated as though they were received on the same day.

HOW TO USE THIS 471 RECEIPT ACKNOWLEDGMENT LETTER TO CORRECT INFORMATION ON YOUR FORM 471 (ACT WITHIN 3 WEEKS!)

If you find data entry errors on this letter, or you previously identified errors on your Form 471, these can be corrected using this Form 471 Receipt Acknowledgment Letter. Examples of the errors that can be corrected are:

* Block 1 information (such as contact person or street address);
* Reductions to Block 5 Funding Requests (Reductions to Block 5 Funding Requests are allowable except for those that would increase your discount percentage due to a change in recipients of that Block 5 service.);
* Correction of an incorrect SPIN because of a data entry error or because the company has merged with or been acquired by another company (Requests to change service providers for other reasons cannot be accommodated through the Receipt Acknowledgment Process.);

* If on your Form 471 you incorrectly combined or "bundled" into one Funding Request Number (FRN) two or more services from different service providers (for example, local phone service from one company and long distance service from another) or from different eligible service categories (such as internal connections and Internet access), you may request us to "split" or "unbundle" the FRN.
  NOTE: The total dollar amount represented by the newly divided FRN must not exceed the amount you requested for the original combined FRN. On the photocopy of your Receipt Acknowledgment Letter, cross out the original bundled FRN, then write in the SPIN, Service Provider Name, Services Ordered category, Total Program Year Pre-Discount $ Amount, and Discount for each distinct service you have now "unbundled," making sure that the total dollars requested add up to no more than the ORIGINAL request.

To notify us of the allowable corrections you wish to make, please note that the SLD must receive these corrections within 3 weeks of the date of this letter. Follow these simple steps to make corrections:

1. Photocopy your Receipt Acknowledgment Letter.
2. Draw a line through each incorrect item, and mark clearly next to it what the correct information should be.
3. Please write the name of the contact person and telephone number on the first page of the RAL copy that will be sent to the SLD so that we can contact you if we have questions about your requested changes.
4. Make a photocopy of your marked-up letter to keep for your files.
5. Send your marked-up letter to arrive within three weeks of the date of this Form 471 Receipt Acknowledgment Letter to: Data Entry Corrections, Schools and Libraries Division, Box 125 - Correspondence Unit, 80 South Jefferson Road, Whippany, NJ 07981. (Please no e-mail.) We recommend that you send your marked-up letter via certified mail or another mode of delivery that will provide you with proof of delivery. Alternatively, you may fax your marked-up letter within three weeks of the date of this Form 471 Receipt Acknowledgment Letter. Please fax your marked-up letter with a Fax Cover Page to: Data Entry Corrections, fax # (973) 884-8217 and indicate the number of pages you are faxing. When faxing, save your confirmation page from sending the fax as your receipt of completed transmission.
6. Allowable corrections received in a timely fashion will be reflected in your Funding Commitment Decision Letter. We will not make corrections that do not fall into the categories defined as Allowable Corrections, above. Please note: the SLD will not advise you that we have received your "change request."
7. Please notify your service provider of any corrections to the Receipt Acknowledgment Letter that you submit to the SLD. Your service provider has also received a copy of the original Form 471 RAL letter. This correction will help your service provider keep your records updated.

EXPLANATION OF LINE ITEM INFORMATION

Certain information from each Block 5 of Form 471 Application Number 320217 that passed Minimum Processing Standards and that could be entered into our data system is shown below. There are six important components of information shown for each Block 5:

1. FRN (Funding Request Number): The FRN is the Funding Request Number that the SLD assigned to each Block 5 funding request that is entered into our data system. This number will be cited in relation to the SLD's funding decision contained in the Funding Commitment Decision Letter. The FRN information will also be shared with service providers so that they can provide discounted bills and invoice the SLD for the approved discount amount.
2. SPIN (Service Provider Identification Number): This is the Service Provider Identification Number that you provided. This is a unique identification number assigned to each service provider.
3. Service Provider Name: This is the legal name in our database that is associated with the Service Provider Identification Number that you provided.
4. Category of Service: This is the type of service for which you have requested discounts from Block 5, Item 11. The categories of services are: Telecommunications Services (Telc Svc); Internet Access (Inet Acc); Internal Connections (Intr Con).
5. Pre-discount Dollar Amount: This is the total annual pre-discount cost for each FRN. This amount is taken from Block 5, Item 23, Column I.
6. Discount Percentage: This is the discount percentage from Block 5, Item 23, Column J.

MISSING FRNs

If information about a particular FRN is not included in the itemized list of Block 5 FRNs set forth above, this is because the FRN did not pass Minimum Processing Standards. If this is the case, you will receive a separate letter from the SLD informing you that

these FRNs have been rejected, with an explanation of the reason for rejection. If you believe that there were FRNs included in your Form 471 which are not listed in this letter AND you have not received a letter informing you that those FRNs are rejected, please write to us at the address listed at the bottom of this letter. See also "QUESTIONS ABOUT THIS LETTER" below.

Please note that the SLD Client Service Bureau may not have the information necessary to respond to your inquiry; therefore, your letter should be sent to the New Jersey address featured below.

FUTURE CONTACTS WITH PIA

It may be important for us to contact you as our PIA (Program Integrity Assurance) Team reviews the funding requests contained in your Form 471. Our requests for clarification and/or additional documentation will require a prompt response. The due date for such responses will be established at the time that the PIA Team may contact you. Please make sure that the contact person on your application is available to speak with the PIA Team, or that a surrogate is available. In addition, you should monitor on a daily basis the fax and e-mail locations that you may have cited in your Form 471 for the applicant and for the contact person for the applicant.

COMMUNICATIONS WITH YOUR SERVICE PROVIDERS

The SLD is also sharing this FRN information with service providers whose SPINs are listed on Form 471 applications. This information is provided so that service providers can undertake the preparatory steps of identifying their potential customers for whom discounts may be issued. NO DISCOUNTS will be provided until after:

* the SLD issues the Funding Commitment Decision Letter for a particular application; AND
* technology plans, if applicable, have been approved; AND
* the applicant submits a Form 486 with a valid service start date.

The SLD encourages Form 471 applicants to contact their service providers to inform the service providers of the funding requests submitted to the SLD. Service providers may request additional information concerning the specific services contained within each funding request in order to facilitate discounted billing. Applicants are encouraged to share this information with service providers in order for the service providers to begin the preparatory billing steps.

QUESTIONS ABOUT THIS LETTER

If you have any questions regarding the above information, please write to us at SLD, Box 125-Correspondence Unit, 80 South Jefferson Road, Whippany, NJ 07981.

Thank you for your interest in the Schools and Libraries Universal Service Program.

Schools and Libraries Division
Universal Service Administrative Company

Funding Request Number: 849110
SPIN: 143004610 Service Provider Name: Pacific Bell Internet Services
Category of Services: Inet Acc(s)
Pre-discount $ Amount: $64,500.04
Discount Percentage: 50%

Funding Request Number: 849698
SPIN: 143004610 Service Provider Name: Pacific Bell Internet Services
Category of Services: Inet Acc(s)
Pre-discount $ Amount: $12,000.00
Discount Percentage: 50%

USAC

Universal Service Administrative Company
Schools & Libraries Division

FUNDING COMMITMENT DECISION LETTER

(Funding Year 2002: 07/01/2002 - 06/30/2003)

not funded
need to appeal

June 3, 2002

CLOVIS UNIFIED SCHOOL DISTRICT
Pam Viar
1450 HERNDON AVE
CLOVIS, CA 93611-0567

Re: Form 471 Application Number: 320217
Funding Year 2002: 07/01/2002 - 06/30/2003
Billed Entity Number: 144027
Applicant's Form Identifier: YR5INTERNET

Thank you for your Funding Year 2002 E-rate application and for any assistance you provided throughout our review. We have completed review of your Form 471. This letter is to advise you of our decision(s).

FUNDING COMMITMENT REPORT

On the pages following this letter, we have provided a Funding Commitment Report for the Form 471 application cited above. We have reviewed each Discount Funding Request on your Form 471 application and have assigned a Funding Request Number (FRN) to each Block 5. The enclosed report includes a list of the FRNs from your application. The SLD is also sending this information to your service provider(s) so preparations can be made to begin implementing your E-rate discount(s) upon the filing of your Form 486. Immediately preceding the Funding Commitment Report, you will find a guide that defines each line of the Report.

NEXT STEPS

FILE FORM 486. Once you have reviewed this letter and have determined that some or all of your requests have been funded, your next step to facilitate receipt of discounts as featured in this letter will be to file an FCC Form 486 with the SLD. The Form 486 notifies the SLD to begin payment to your service provider and provides certified indication that your technology plan(s) has been approved by an SLD certified Technology Plan Approver. The Form 486 and instructions and the list of SLD certified Technology Plan Approvers can be found on the SLD web site at <www.sl.universalservice.org> or you can call the SLD Client Service Bureau at 1-888-203-8100 and ask that the form be sent to you. The Form 486 dated July, 2001 in the lower right corner MUST be used for Funding Year 2002 and for any previous funding years. Submissions of earlier versions of the Form 486 will be returned to you and will not be able to be processed. As you complete Form 486, you should also contact your service provider to verify they have received notice from the SLD of your funding commitments. After the SLD processes your Form 486, we can process invoices for services that have been provided to you.

DEADLINE FOR FORM 486. Form 486 must be postmarked within 120 days of the Service Start Date featured on the Form 486 or within 120 days of the date of the Funding Commitment Decision Letter, whichever is later. If the Form 486 is postmarked after the later of those two dates, the date 120 days before the Form 486 postmark date will become the start date for discounted services. If the service start date is moved, your funding commitment may be reduced. You are advised to keep proof of the date of mailing of your form(s).

REVIEW CIPA REQUIREMENTS. On December 21, 2000, the Children's Internet Protection Act (CIPA) was signed into law. That law requires schools and libraries that receive Universal Service discounts for certain services to adopt an Internet safety policy incorporating the use of filtering or blocking technology on computers with Internet access as a condition of receiving those discounts. Funding Year 2002 may be the Second Funding Year for purposes of CIPA for one or more schools and/or libraries represented on your Form 486. (Funding Year 2002 is the Second Funding Year for purposes of CIPA for a school or library if a Form 486 for internet access or internal connections was successfully data entered for Funding Year 2001. See the section of the Form 486 Instructions entitled "Impact of CIPA Requirements on Form 486" for more information on First, Second and Third Funding Years.) If Funding Year 2002 is the Second Funding Year for purposes of CIPA for one or more schools and/or libraries represented on your Form 486, those school(s) and/or library(ies) must certify that they are in compliance with CIPA unless state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification otherwise required. A school or library so prevented may request a waiver for Funding Year 2002. Certification(s) for purposes of CIPA and CIPA waiver request(s) must be made on the Form 486 or the Form 479, whichever is appropriate. See the Form 486 Instructions and the Form 479 Instructions for more information. You may also refer to the SLD web site at <www.sl.universalservice.org> or call the Client Service Bureau at 1-888-203-8100 for more information about Form 486, Form 479, and the requirements of CIPA.

FILE FORM 472 (APPLICANT) or FORM 474 (SERVICE PROVIDER). After a Form 486 has been properly filed, the SLD must receive an invoice from either the applicant or the service provider in order to make payments for approved discounts on eligible services. Form 472, Billed Entity Applicant Reimbursement (BEAR) Form, is filed by the applicant; Form 474, Service Provider Invoice Form, is filed by the service provider.

NEW DEADLINES FOR INVOICES. Invoices must be postmarked within 90 days of the last date to receive service or within 90 days of the date of the Form 486 Notification Letter, whichever is later. If an invoice is postmarked after the later of those two dates, payment will be denied.

TO APPEAL THESE FUNDING COMMITMENT DECISIONS

If you wish to appeal the Funding Commitment Decision(s) (FCD) indicated in this letter, your appeal must be RECEIVED BY THE SCHOOLS AND LIBRARIES DIVISION (SLD) WITHIN 60 DAYS OF THE ABOVE DATE ON THIS LETTER. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

1. Include the name, address, telephone number, fax number, and e-mail address (if available) for the person who can most readily discuss this appeal with us.

2. State outright that your letter is an appeal. Identify which FCD Letter you are appealing. Indicate the relevant funding year and the date of the Funding Commitment Decision Letter. Your letter of appeal must also include the applicant name, the Form 471 Application Number, and the Billed Entity Number from the top of your FCD Letter.

3. Identify the particular Funding Request Number (FRN) that is the subject of your appeal. When explaining your appeal, include the precise language or text from the Funding Commitment Decision Letter that is at the heart of your appeal. By pointing us to the exact words that give rise to your appeal, the SLD will be able to more readily understand and respond appropriately to your appeal. Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep copies of your correspondence and documentation.

4. Provide an authorized signature on your letter of appeal.

If you are submitting your appeal on paper, please send your appeal to: Letter of Appeal, Schools and Libraries Division, Box 125 - Correspondence Unit, 80 South Jefferson Road, Whippany, NJ 07981. Additional options for filing an appeal can be found in the "Appeals Procedure" posted in the Reference Area of the SLD web site or by calling the Client Service Bureau.

While we encourage you to resolve your appeal with the SLD first, you have the option of filing an appeal directly with the Federal Communications Commission (FCC). You should refer to CC Docket Nos. 96-45 and 97-21 on the first page of your appeal to the FCC. Your appeal must be RECEIVED BY THE FCC WITHIN 60 DAYS OF THE ABOVE DATE ON THIS LETTER. Failure to meet this requirement will result in automatic dismissal of your appeal. Further information and options for filing an appeal directly with the FCC can be found in the "Appeals Procedure" posted in the Reference Area of the SLD web site or by calling the Client Service Bureau. We strongly recommend that you use either the e-mail or fax filing options because of continued substantial delays in mail delivery

to the FCC. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

NOTICE ON RULES AND FUNDS AVAILABILITY

Applicants' receipt of funding commitments is contingent on their compliance with all statutory, regulatory, and procedural requirements of the universal service mechanisms for schools and libraries. FCC Form 471 Applicants who have received funding commitments continue to be subject to audits and other reviews that SLD or the Federal Communications Commission may undertake periodically to assure that funds have been committed and are being used in accordance with all such requirements. If the SLD subsequently determines that its commitment was erroneously issued due to action or inaction, including but not limited to that by SLD, the Applicant, or Service Provider, and that the action or inaction was not in accordance with such requirements, SLD may be required to cancel these funding commitments and seek repayment of any funds disbursed not in accordance with such requirements. The SLD, and other appropriate authorities (including but not limited to USAC and the FCC), may pursue enforcement actions and other means of recourse to collect erroneously disbursed funds. The timing of payment of invoices may also be affected by the availability of funds based on the amount of funds collected from contributing telecommunications companies.

We look forward to continuing our work with you on connecting our schools and libraries through advanced telecommunications services.

Sincerely,

Schools and Libraries Division
Universal Service Administrative Company

Enclosures

A GUIDE TO THE FUNDING COMMITMENT REPORT

Attached to this letter will be a report for each E-rate funding request from your application. We are providing the following definitions.

FUNDING REQUEST NUMBER (FRN): A Funding Request Number is assigned by the SLD to each Block 5 of your Form 471 once an application has been processed. This number is used to report to Applicants and Service Providers the status of individual discount funding requests submitted on a Form 471.

FUNDING STATUS: Each FRN will have one of three definitions: "Funded," "Not Funded," or "As Yet Unfunded."

1. An FRN that is "Funded" will be approved at the level that SLD determined is appropriate for that item. The funding level will generally be the level requested unless the SLD determines during the application review process that some adjustment is appropriate.

2. An FRN that is "Not Funded" is one for which no funds will be committed. The reason for the decision will be briefly explained in the "Funding Commitment Decision," and amplification of that explanation may be offered in the section, "Funding Commitment Decision Explanation." An FRN may be "Not Funded" because the request does not comply with program rules, or because the total amount of funding available for this Funding Year was insufficient to fund all requests.

3. An FRN that is "As Yet Unfunded" reflects a temporary status that is assigned to an FRN when the SLD is uncertain at the time the letter is generated whether there will be sufficient funds to make commitments for requests for internal connections at a particular discount level. For example, if your application included requests for discounts on both telecommunications services and internal connections, you might receive a letter with our funding commitment for your telecommunications funding requests and a message that your internal connections requests are "As Yet Unfunded." You would receive a subsequent letter(s) regarding the funding decision on your internal connections requests.

SERVICES ORDERED: The type of service ordered from the service provider, as shown on Form 471.

SPIN (Service Provider Identification Number): A unique number assigned by the Universal Service Administrative Company to service providers seeking payment from the Universal Service Fund for participating in the universal service support mechanisms. A SPIN is also used to verify delivery of services and to arrange for payment.

SERVICE PROVIDER NAME: The legal name of the service provider.

CONTRACT NUMBER: The number of the contract between the eligible party and the service provider. This will be present only if a contract number was provided on Form 471.

BILLING ACCOUNT NUMBER: The account number that your service provider has established with you for billing purposes. This will be present only if a Billing Account Number was provided on Form 471.

EARLIEST POSSIBLE EFFECTIVE DATE OF DISCOUNT: The first possible date of service for which the SLD will reimburse service providers for the discounts for the service.

CONTRACT EXPIRATION DATE: The date the contract expires. This will be present only if a contract expiration date was provided on Form 471.

SITE IDENTIFIER: The Entity Number listed in Form 471, Block 5, Item 22a will be listed. This will appear only for "site specific" FRNs.

ANNUAL PRE-DISCOUNT AMOUNT FOR ELIGIBLE RECURRING CHARGES: Eligible monthly pre-discount amount approved for recurring charges multiplied by number of months of recurring service provided in the funding year.

ANNUAL PRE-DISCOUNT AMOUNT FOR ELIGIBLE NON-RECURRING CHARGES: Annual eligible non-recurring charges approved for the funding year.

PRE-DISCOUNT AMOUNT: Amount in Form 471, Block 5, Item 23, Column I, as determined through the application review process.

DISCOUNT PERCENTAGE APPROVED BY THE SLD: This is the discount rate that the SLD has approved for this service.

FUNDING COMMITMENT DECISION: This represents the total amount of funding that the SLD has reserved to reimburse service providers for the approved discounts for this service for this funding year. It is important that you and the service provider both recognize that the SLD should be invoiced and the SLD may direct disbursement of discounts only for eligible, approved services actually rendered.

FUNDING COMMITMENT DECISION EXPLANATION: This entry may amplify the comments in the "Funding Commitment Decision" area.

FUNDING COMMITMENT REPORT

Form 471 Application Number: 320217
Funding Request Number: 849110 Funding Status: Not Funded
Services Ordered: Internet Access
SPIN: 143004610 Service Provider Name: Pacific Bell Internet Services
Contract Number: MTM
Billing Account Number: 559-327-9000
Earliest Possible Effective Date of Discount: 07/01/2002
Contract Expiration Date: 06/30/2003
Annual Pre-discount Amount for Eligible Recurring Charges: $62,000.04
Annual Pre-discount Amount for Eligible Non-recurring Charges: $2,500.00
Pre-Discount Amount: $64,500.04
Discount Percentage Approved by the SLD: N/A
Funding Commitment Decision: $0.00 - Svcs. not requested on F. 470
Funding Commitment Decision Explanation: The 470 cited did not include service of this type; therefore it does not meet the 28 day competitive bidding requirement.

monthly serv.

Funding Request Number: 849698 Funding Status: Not Funded
Services Ordered: Internet Access
SPIN: 143004610 Service Provider Name: Pacific Bell Internet Services
Contract Number: MTM
Billing Account Number: 559-327-9000
Earliest Possible Effective Date of Discount: 07/01/2002
Contract Expiration Date: 06/30/2003
Annual Pre-discount Amount for Eligible Recurring Charges: $12,000.00
Annual Pre-discount Amount for Eligible Non-recurring Charges: $.00
Pre-Discount Amount: $12,000.00
Discount Percentage Approved by the SLD: N/A
Funding Commitment Decision: $0.00 - Svcs. not requested on F. 470
Funding Commitment Decision Explanation: The 470 cited did not include service of this type; therefore it does not meet the 28 day competitive bidding requirement.

one-time fees

USAC
Schools and Libraries Division
Box 125 Correspondence Unit
80 South Jefferson Road
Whippany, New Jersey 07981

REC'D ACCT
2007 JUL

TIME SENSITIVE MATERIAL

00080
CLOVIS UNIFIED SCHOOL DISTRICT
Pam Viar
1450 HERNDON AVE
CLOVIS, CA 93611-0567

CLOVIS
UNIFIED
SCHOOL DISTRICT

1450 HERNDON AVENUE
CLOVIS, CA 93611-0599
559.327.9000
www.clovisusd.k12.ca.us

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Associate Superintendent
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Associate Superintendent

1st Appeal

July 8, 2002

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

Re: Form 471 Application Number: 320217
Funding Year 2002: 07/01/02 – 06/30/03
Billed Entity Number: 144027
Applicant's Form Identifier: YR5INTERNET

To Whom It May Concern:

I am writing concerning the Funding Commitment Decision Letter dates June 3, 2002.
This letter states the information on the Form 471 does not agree with the information on the Form 470.

After researching our records, I have discovered I incorrectly identified the Application Number on the Form 471 at the time it was submitted. I had submitted two Form 470 in error for the same services. The correct information for Block 5, line 12 is:

Form 470 Application Number: 15 digits **446460000409355**

I have attached copies of all the applications. Please contact me as soon as convenient. I apologize for the confusion and certainly hope this does not jeopardize our funding.

I can be reached at (559) 327-9050. My fax number is (559)327-9059. My e-mail address is: pamviar@clovisusd.k12.ca.us

I am very anxious to discuss this with you and hope you can guide me on the next step.

Sincerely,

Pam Viar

Pam Viar
Supervisor of Accounting

FCC Form
486

Do Not Write In This Area

Approval by OMB
3060-0853

Schools and Libraries Universal Service Receipt of Service Confirmation Form

FCC Form 486: To be completed by the Billed Entity
Please read instructions before completing.

Estimated Average Burden Hours For First Submission: 15.0 hours
For Subsequent Submissions: 1.5 hours

Applicant's Form Identifier 486Yr5INTERNET

Block 1: Billed Entity Information

1. Name of Billed Entity

Clovis Unified School District

2. Billed Entity Number

144027

3. Funding Year

2002 - Y Y

4. Complete Mailing Address of Billed Entity

Street Address, P.O. Box or Route Number

1450 Herndon Ave.

City

Clovis

State

CA

Zip Code

93611 -

Telephone Number

559 - 327 - 9050

Extension

Fax Number

559 - 327 - 9059

Email Address

0 4 8 6 0 1 0 1 0 2

Entity Number	144027	**Applicant's Form Identifier**	486YR5INTERNET
Contact Person	Pam Viar	**Phone Number**	559-327-9050

5. Contact Person Information

Contact Person Name

Pam Viar

Street Address, P.O. Box or Route Number

1450 Herndon Ave.

City

Clovis

State: CA

Zip Code: 93611 -

Check the box next to the preferred mode of contact. (At least one box MUST be checked.)

☒ Telephone Number: 559 - 327 - 9050

Extension:

☐ Fax Number: - -

☐ Email Address

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 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.

NOTICE: The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended, 47 U.S.C. § 254. The data in the form will be used to inform the Schools and Libraries Division of the Universal Service Administrative Company that a billed entity, and/or the schools and libraries that it represents, has begun or has planned to begin to receive service after receiving a funding commitment approval pursuant to FCC Form 471.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or potential violation of an FCC statute, regulation, rule or order, your application may be referred to the federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party in a proceeding before the body or has an interest in the proceeding. In addition, consistent with the Communications Act of 1934, FCC regulations and orders, the Freedom of Information Act, 5 U.S.C. § 552, or other applicable law, information provided in or submitted with this form or in response to subsequent inquiries may be disclosed to the public.

If you do not provide the information requested on the form, your application may be returned without action or your application may be delayed.

The foregoing Notice is required by the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. § 3501, et seq.

Public reporting burden for this collection of information is estimated to average 15.0 hours for the first submission and 1.5 hours for subsequent submissions, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the reporting burden, to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, D.C. 20554.

0 4 8 6 0 1 0 2 0 2

Entity Number	144027	**Applicant's Form Identifier**	485YR5INTERNET
Contact Person	Pam Viar	**Phone Number**	559-327-9050

Block 2: Early Filing Information and CIPA Waiver Request

6a. Early Filing

CHECK THE BOX BELOW IF THE FRNS ON THIS FORM 486 ARE FOR SERVICES STARTING ***ON OR BEFORE*** JULY 31 OF THE FUNDING YEAR.

☐ The Funding Requests listed in Block 3 have been approved by SLD as shown in my Funding Commitment Decision Letter (FCDL). I have confirmed with the service provider(s) featured in those Funding Requests that these services will start on or before July 31 of the Funding Year.

Remember: Early filing using Item 6a is an option if and ONLY if services will start within the month of July of the relevant Funding Year, all relevant certifications in Block 4 can be accurately made, and the Form 486 is postmarked on or before July 31 of the Funding Year.

6b. CIPA Waiver

CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR THE SECOND FUNDING YEAR AFTER APRIL 20, 2001 IN WHICH YOU HAVE APPLIED FOR DISCOUNTS IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY.

☐ I am providing notification that, as of the date of the start of discounted services, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and/or (l), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the schools or libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Third Funding Year after April 20, 2001 in which they apply for discounts.

0 4 8 6 0 1 0 3 0 2

Entity Number	144027	**Applicant's Form Identifier**	485YR5INTERNET
Contact Person	Pam Viar	**Phone Number**	559-327-9050

Block 3: Service Information

7. **Please provide the following information for each Form 471 Block 5 (Discount Funding Request) item for which the Billed Entity is indicating that the named Service Provider may begin submitting invoices to SLD. You will need your FCDL for some of the information required below.**
Remember: The FRNs listed below must be from the same Funding Year as is listed in Item 3, Block 1.
If you need additional pages, please label them 4A, 4B, 4C, etc. and indicate the number in the space provided here: Page 4

	(A) 471 Application Number (10 digits) From FCDL	(B) Funding Request Number (FRN) (10 digits) From FCDL	(C) Billing Account Number (required if contained on your FCDL)	(D) Service Provider Name From FCDL	(E) Service Provider Identification Number (SPIN) (9 digits) From FCDL	(F) Funding Year Service Start Date* (Earliest Date that Discounts Will Begin) (*Cannot be before July 1 of the Funding Year for which you are requesting discounts.)
1	320217	849110			143004610	07/01/2002
2	320217	849198			143004610	07/01/2002
3						MMDDYYYY
4						MMDDYYYY
5						MMDDYYYY
6						MMDDYYYY
7						MMDDYYYY
8						MMDDYYYY

0 4 8 6 [illegible] 0 4 0 2

Entity Number	144027	**Applicant's Form Identifier**	486YR5INTERNET
Contact Person	Pam Viar	**Phone Number**	559-327-9050

Block 4: Certifications and Signature

8. I certify that the technology plan(s) for the services received as indicated on this Form 486 have been approved as necessary. Fill in the name(s) of the organization(s) that reviewed and approved a technology plan for any eligible entity that is receiving services covered under this form; attach an additional list if necessary. If ALL of the FRNs listed herein are for basic telephone service only, write in "none" here.

Fresno County Office of Education

9. I certify that the services listed on this Form 486 have been, are planned to be, or are being provided to all or some of the eligible entities identified in the Form 471 application(s) cited above. I certify that there are signed contracts covering all of the services listed on this Form 486 except for those services provided under tariff or month-to-month arrangements. I certify that I am authorized to submit this receipt of service confirmation 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.

10. 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. I recognize that I may be audited pursuant to this application and will retain for five years any and all records, including Forms 479 where required, that I rely upon to complete this form and, if audited, will make available to the Administrator such records.

NOTES FOR COMPLETING THE CERTIFICATIONS IN ITEM 11

A Billed Entity who is the Administrative Authority must check Item 11a or 11b or 11c. Check only ONE item. Note that the certification in Items 11a and 11b are different for schools and for libraries. If the Billed Entity is not the Administrative Authority, skip to Item 11d.

A Billed Entity who represents one or more Administrative Authorities must check Item 11d or 11e. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.")

A Billed Entity who represents one or more Administrative Authorities in Funding Years after Funding Year 2001 and who checks Item 11d must check Item 11f or 11g. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.")

IF THIS FORM PERTAINS TO A FUNDING YEAR PRIOR TO FUNDING YEAR 2001 (THE FUNDING YEAR BEGINNING JULY 1, 2001), SKIP TO ITEM 12.

Entity Number	144027	**Applicant's Form Identifier**	486YR5INTERnet
Contact Person	Pam Viar	**Phone Number**	559-327-9050

11. FOR A BILLED ENTITY WHO IS THE ADMINISTRATIVE AUTHORITY:

I certify that as of the date of the start of discounted services:

a. [XX] (FOR SCHOOLS) the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 has (have) complied with the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l).

(FOR LIBRARIES) the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 has (have) complied with the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(l).

b. [ ] (FOR SCHOOLS) pursuant to the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 is (are) undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA for the next funding year, but has (have) not completed all requirements of CIPA for this funding year.

(FOR LIBRARIES) pursuant to the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(l), the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 is (are) undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA for the next funding year, but has (have) not completed all requirements of CIPA for this funding year.

c. [ ] The Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), does not apply because the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 is (are) receiving discount services only for telecommunications services.

FOR A BILLED ENTITY WHO REPRESENTS ONE OR MORE ADMINISTRATIVE AUTHORITIES : [1]

I certify that as of the date of the start of discounted services:

d. [ ] I certify as the Billed Entity for the consortium that I have collected duly completed and signed Forms 479 from all eligible members of the consortium.

e. [ ] I certify as the Billed Entity for the consortium that the only services that have been approved for discounts under the universal service support mechanism on behalf of eligible members of the consortium are telecommunications services, and therefore the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), do not apply.

For Funding Years after Funding Year 2001: If you checked Item 11d above, check ONE of the boxes below:

f. [ ] I certify that some or all of the eligible consortium members checked Form 479 Item 6d to seek a CIPA Waiver, and upon request from the Administrator I can provide this information; OR

g. [ ] I certify that no eligible consortium members checked Form 479 Item 6d to seek a CIPA Waiver.

The certification language above is not intended to fully set forth or explain all the requirements of the statute.

[1] See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities."

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FCC Form
486

Do Not Write In This Area

Approval by OMB
3060-0853

Entity Number	144027	**Applicant's Form Identifier**	486YR5INTERNET
Contact Person	Pam Viar	**Phone Number**	559-327-9050

I certify that I am authorized to submit this receipt of service confirmation 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.

12. Signature of authorized person

Pam Viar

13. Date

M M D D Y Y Y Y

14. Printed name of authorized person

Pam Viar

15. Title or position of authorized person

Supervisor Of Accounting

16. Telephone number of authorized person

559 - 327 - 9050

Extension

Please submit this form to:

SLD-Form 486
P. O. Box 7026
Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD-Form 486
c/o Ms. Smith
3833 Greenway Drive
Lawrence, Kansas 66046
888-203-8100

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CLOVIS UNIFIED SCHOOL DISTRICT

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January 13, 2002

To: Melanie Moore
Schools & Libraries Division

Re: Form 486 Funding Year 5
Form Identifier: 486YR5INTERNET

From: Pam Viar

This is my third fax to you in reference to case number 154353.
Please contact me and let me know you have received this. My phone number is 559-327-9050.

As you are aware I am waiting for an answer to our Letter of Appeal for Form 471 Application Number 320217. I have attached a copy of that appeal.

I now understand I cannot submit a Form 486 until this is resolved.

Once again, I am requesting this Form 486 to be cancelled.

Thank you for your assistance.