

**Schools and Libraries Universal Service
Services Ordered and Certification Form 471**

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. (See www.sl.universalservice.org for filing this form online)

Application # WLS72004	Form 471 Application #: _____ (To be inserted by Fund Administrator)
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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 (30 characters max.)	Washington Local School District
2	Funding Year: July 1, 2004 through June 30, 2005	3 Entity Number (up to 10 digits) 129311
4a	Street Address, P.O. Box, or Route Number	3505 W. Lincolnshire Blvd.
	City Toledo	State OH Zip Code 43606-1231
b	Telephone Number (10 digits + ext.) (419) 473 - 8228	
c	Fax Number (10 digits) (419) 473-8247	
d	E-mail Address (50 characters max.) dbringma@washloc.k12.oh.us	
5	Type of Application	
	<input type="checkbox"/> School (public or non-public school)	
	<input checked="" type="checkbox"/> School District (LEA; public or non-public (e.g., diocesan) local district representing multiple schools)	
	<input type="checkbox"/> Library (library (i.e. outlet/branch, system))	
	<input type="checkbox"/> Consortium <input type="checkbox"/> Check here if any members of this consortium are ineligible non-governmental entities.	

6a	Contact Person's Name	Dave Bringman
	<i>First, fill in every item of the Contact Person's information below that is different from Item 4, above.</i>	
	<i>Then check the box next to the preferred mode of contact. (At least one box MUST be checked.)</i>	
b	<input type="checkbox"/> Street Address, P.O. Box, or Route Number	3505 W. Lincolnshire Blvd.
	City Toledo	State OH Zip Code 43606-1231
c	<input type="checkbox"/> Telephone Number (10 digits + ext.) (419) 473 -8228	
d	<input type="checkbox"/> Fax Number (10 digits) (419) 473 - 8247	
e	<input checked="" type="checkbox"/> E-mail Address (50 characters max.) dbringma@washloc.k12.oh.us	
f		

Block 2: Minor Modification to Existing Contract?

7	<input type="checkbox"/> Check if this Form 471 represents a minor modification, such as a modification of services, to a Form 471 for which you already have a Receipt Acknowledgement Letter. Provide the data requested below, attach a Description of Services highlighting the modified service, and sign Block 6.
	Form 471 Application #: _____ Funding Request Number: _____
Minor modification requests can be filed MANUALLY only. Please see www.sl.universalservice.org for filing instructions.	

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419/473-8228

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 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	(Schools/districts/consortia only) Telephone service: How many classrooms had phone service before and after your order?	447	447
b	High-bandwidth voice/data/video service: How many buildings served before and after your order?	13	13
c	High-bandwidth voice/data/video service: Highest speed to a building before and after your order?	T-1	T-1
d	Dial-up Internet connections: How many before and after your order?	8	8
e	Dial-up Internet connections: Highest speed before and after your order?	56	56
f	Direct connections to the Internet: How many before and after your order?	1	1
g	Direct connections to the Internet: Highest speed before and after your order?	T-1	T-1
h	Internet access (for schools): How many rooms have Internet access before and after your order?	2	2
i	Internet access (for libraries): How many buildings have Internet access before and after your order?	13	13
j	Internet access: How many computers (or other devices) with Internet access before and after your order?	139	139
k	Other technology outcomes: (please specify):		

Block 4: Discount Calculation Worksheets (pages 3a, 3b, and 3c)

The following 3 pages (3a, 3b, and 3c) are Block 4 worksheets for use in calculating your discount for services. You will complete one or more depending on the type of application you are filing. Each worksheet has instructions.

- If you are filing as a school or a school district, use Worksheet A (page 3a).
- If you are filing as a library (i.e. outlet/branch, system), use Worksheet B (page 3b).
- If you are filing as a consortium, use Worksheet C (page 3c), and include as many Worksheets A and B as you need for back-up documentation.

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 4: Discount Calculation Worksheet A for Schools/School Districts

Worksheet #A-1

Page 1 of 2

Instructions: If you are filing a School/School District application, use this worksheet to calculate the discount rate for site-specific services and/or to determine the weighted average discount calculations for shared services.

(For Administrator's Use)

10a If you are:

- Applying for discounts **ONLY** for an individual school, or **ONLY** site-specific services: Complete columns 1-7 only for each school. Add and number pages as needed. Then use each school's Entity Number and its discount from Column 7 to complete Block 5 site-specific service to that school.
- Applying for discounts on services shared by **ALL** schools in the district (with or without site-specific services as well): Complete all columns 1-8 for all schools in the district. Then use the Weighted Average Discount in 10c (below) to complete Block 5 for shared services.
- Applying for discounts on different shared services shared by different groups of schools (with or without site-specific services as well): Complete one worksheet, columns 1-8 PLUS 10c, for EACH different group of schools sharing a service. Designate this worksheet A-1, A-2, A-3, etc.

10b List entities and calculate discount(s).

School District Name: Washinton Local School District

School District Entity Number: 129311

1	2	3	4	5	6	7	8
Name of Eligible School	Entity Number	Urban or Rural U or R	Total # of Students	# of Students Eligible for NSLP	% Students Eligible for NSLP (Col. 5 ÷ Col. 4)	Discount % from Discount Matrix	Weighted Product for Calculating Shared Discount (Col. 4 x Col. 7)
Whitmer High School	041046	U	2110	169	0.080094787	40%	844
Jackman Elementary	018127	U	376	115	0.305851064	50%	188
Washington Jr. High School	039438	U	604	107	0.177152318	40%	241.6
Greenwood Elementary	027946	U	462	151	0.326839827	50%	231
Hiawatha Elementary	016006	U	273	57	0.208791209	40%	109.2
Jefferson Jr. High School	017558	U	562	108	0.192170819	40%	224.8
MrGregor Elementary	023549	U	290	57	0.196551724	40%	116
Meadowvale Elementary	024000	U	480	112	0.233333333	50%	240
Monac Elementary	025189	U	453	108	0.238410596	50%	226.5
Totals for calculating Weighted Average Discount							2421.1

10c Weighted Average Discount % for Shared Services (Col. 8 total divided by Col. 4 total. Round to nearest %) →

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 4: Discount Calculation Worksheet A for Schools/School Districts

Worksheet #A-1

Page 2 of 2

Instructions: If you are filing a School/School District application, use this worksheet to calculate the discount rate for site-specific services and/or to determine the weighted average discount calculations for shared services.

(For Administrator's Use)

10a If you are:

- **Applying for discounts ONLY for an individual school, or ONLY site-specific services:** Complete columns 1-7 only for each school. Add and number pages as needed. Then use each school's Entity Number and its discount from Column 7 to complete Block 5 site-specific service to that school.
- **Applying for discounts on services shared by ALL schools in the district (with or without site-specific services as well):** Complete all columns 1-8 for all schools in the district. Then use the Weighted Average Discount in 10c (below) to complete Block 5 for shared services.
- **Applying for discounts on different shared services shared by different groups of schools (with or without site-specific services as well):** Complete one worksheet, columns 1-8 PLUS 10c, for EACH different group of schools sharing a service. Designate this worksheet A-1, A-2, A-3, etc.

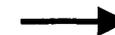
10b List entities and calculate discount(s).

School District Name: Wasington Local School District

School District Entity Number: 129311

1 Name of Eligible School	2 Entity Number	3 Urban or Rural U or R	4 Total # of Students	5 # of Students Eligible for NSLP	6 % Students Eligible for NSLP (Col. 5 ÷ Col. 4)	7 Discount % from Discount Matrix	8 Weighted Product for Calculating Shared Discount (Col. 4 x Col. 7)
Shoreland Elementary	034504	U	515	151	0.293203883	50%	257.5
Trilby Elementary	037549	U	295	95	0.322033898	50%	147.5
Wernert Elementary	040295	U	366	124	0.338797814	50%	183
Totals for calculating Weighted Average Discount			6786				3009.1

10c Weighted Average Discount % for Shared Services (Col. 8 total divided by Col. 4 total. Round to nearest %)



44%

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419/473-8228

Block 4: Discount Calculation Worksheet B For Libraries

Worksheet #B-1

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Instructions: If you are filing a library application, use this worksheet to calculate the discount rate(s) for outlets/branches and systems.

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(For Administrator's Use)

10a If you are:

- **Applying for discounts ONLY for one outlet/branch or ONLY for site-specific services:**
Complete columns 1-5 only for each outlet/branch. Add and number pages as needed.
- **Applying for discounts on services shared by ALL outlets/branches in the library system (with or without site-specific services as well):**
Complete columns 1-5 PLUS 10c below.
- **Applying for discounts on different shared services that are shared by different groups of outlets/branches:**
Complete one worksheet, columns 1-5 PLUS 10c, for EACH different group of outlets/branches sharing a service. Designate this worksheet B-1, B-2, B-3, etc.

10b List entities and calculate discount(s).

Library System Name: _____

Library System Entity Number: _____

1	2	3	4	5
Name of Eligible Library (outlet/branch)	Entity Number (1-10 digits)		Name of School District in which outlet/branch in Column 1 is located	Weighted Average Discount for the School District in Column 4 (round to nearest %)
Totals for calculating Shared Discount				

10c Shared Discount % (Col. 5 total divided by # of outlets/branches in Col. 1. Round to nearest %) →

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419/473-8228

Block 4: Discount Calculation Worksheet C for Consortia

Worksheet #C-1
Page 1 of 1


(For Administrator's Use)

Instructions: If you are filing a Consortium application, use this worksheet to calculate the consortium discount rate based on eligible members' discounts. Provide Worksheets A and/or B for back-up documentation.

10a If you are:

- **Applying for discounts ONLY on site-specific services:**
Complete columns 1-4 only. Add and number pages as needed.
- **Applying for discounts on services shared by ALL members (with or without site-specific services as well):**
Complete columns 1-4 PLUS 10c, below.
- **Applying for discounts on different shared services shared by different groups of consortium members:**
Complete one worksheet, columns 1-4 PLUS 10c, for EACH different group of entities sharing a service. Designate this worksheet C-1, C-2, C-3, etc.

10b List entities and calculate discount(s).

1	2	3	4
ELIGIBLE MEMBER ENTITIES Name of each school, school district and/or library (i.e. outlet/branch, system) in consortium	ENTITY NUMBER For each entity listed in Column 1		ENTITY DISCOUNT School: Discount from Worksheet A, Column 7 School District: Weighted Average Discount from Worksheet A, Item 10c Library System: Discount from Worksheet B, Item 10c
Totals for calculating Shared Discount			

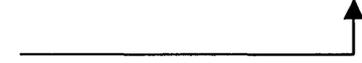
10c Shared Discount %
(Col. 4 total divided by # of entities in Col. 1. Round to nearest %) 

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5: Discount Funding Request(s)

Block 5, page 1 of 14

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.

Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly. 

FRN # _____ (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) <input checked="" type="radio"/> Telecommunications Service <input type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions)	419/531-2235
	16 Billing Account Number (e.g., billed telephone number)	419/531-2235
12 Form 470 Application Number (15 digits)	249240000486023	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing)
13 SPIN - Service Provider Identification Number (9 digits)	18 Contract Award Date (mm/dd/yyyy)	1/17/2002
	19a Service Start Date (mm/dd/yyyy)	7/1/2004
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services)	
14 Service Provider Name	Ameritech	20 Contract Expiration Date (mm/dd/yyyy)
		12/18/2003

21 Description of This Service: You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below.
Attachment # A01

22 Entity/Entities Receiving This Service: a. If the service is site-specific (provided to one site and not shared by others), list 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, list the worksheet number (e.g., A-1): A-1

23 Calculations					Recurring Charges			Non-Recurring Charges			Total Charges	
A	B	C	D	E	F	G	H	I	J	K		
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)		
\$171.00		\$171.00	6.5	\$1,111.50				\$1,111.50	0.44	\$489.06		

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5: Discount Funding Request(s)

Block 5, page 2 of 14

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.
 Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly.

FRN # _____ (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) <input checked="" type="radio"/> Telecommunications Service <input type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions)	MTM
	16 Billing Account Number (e.g., billed telephone number)	419/531-2235
12 Form 470 Application Number (15 digits) 249240000486023	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing)	12/18/2003
13 SPIN - Service Provider Identification Number (9 digits) 143001688	18 Contract Award Date (mm/dd/yyyy)	
	19a Service Start Date (mm/dd/yyyy)	1/18/2005
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services)	6/30/2005
14 Service Provider Name Ameritech	20 Contract Expiration Date (mm/dd/yyyy)	

21 Description of This Service: You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below.
 Attachment # A01

22 Entity/Entities Receiving This Service: a. If the service is site-specific (provided to one site and not shared by others), list 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, list the worksheet number (e.g., A-1): A-1

23 Calculations										
Recurring Charges					Non-Recurring Charges			Total Charges		
A	B	C	D	E	F	G	H	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)
\$171.00		\$171.00	5.5	\$940.50				\$940.50	0.44	\$413.82

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5: Discount Funding Request(s)

Block 5, page 3 of 14

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.

Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly. 

FRN # [REDACTED] (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) <input checked="" type="radio"/> Telecommunications Service <input type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions) 419/473-1281
	16 Billing Account Number (e.g., billed telephone number) 419/473-1281
12 Form 470 Application Number (15 digits) 249240000486023	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/18/2003
13 SPIN - Service Provider Identification Number (9 digits) 143001688	18 Contract Award Date (mm/dd/yyyy) 1/17/2002
	19a Service Start Date (mm/dd/yyyy) 7/1/2004
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services)
14 Service Provider Name Ameritech	20 Contract Expiration Date (mm/dd/yyyy) 1/17/2005

21 **Description of This Service:** You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below.
Attachment # A02

22 **Entity/Entities Receiving This Service:**
 a. If the service is site-specific (provided to one site and not shared by others), list 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, list the worksheet number (e.g., A-1): A-1

23 Calculations										
Recurring Charges					Non-Recurring Charges			Total Charges		
A	B	C	D	E	F	G	H	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)
1696		\$1,696.00	6.5	\$11,024.00				\$11,024.00	0.44	\$4,850.56

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5: Discount Funding Request(s)

Block 5, page 4 of 14

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.

Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly. 

FRN # _____ (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) <input checked="" type="radio"/> Telecommunications Service <input type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tarified services, "MTM" if month-to-month services as described in Instructions) MTM
	16 Billing Account Number (e.g., billed telephone number) 419/473-1281
12 Form 470 Application Number (15 digits) 249240000486023	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/18/2003
13 SPIN - Service Provider Identification Number (9 digits) 143001688	18 Contract Award Date (mm/dd/yyyy)
	19a Service Start Date (mm/dd/yyyy) 1/18/2005
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 6/30/2005
14 Service Provider Name Ameritech	20 Contract Expiration Date (mm/dd/yyyy)
21 Description of This Service:	You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment # A02
22 Entity/Entities Receiving This Service:	a. If the service is site-specific (provided to one site and not shared by others), list 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, list the worksheet number (e.g., A-1): A-1

23 Calculations				Recurring Charges			Non-Recurring Charges		Total Charges		
A	B	C	D	E	F	G	H	I	J	K	
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)	
1696		\$1,696.00	5.5	\$9,328.00				\$9,328.00	0.44	\$4,104.32	

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5: Discount Funding Request(s)

Block 5, page 5 of 14

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.

Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly. 

FRN # _____ (to be assigned by administrator)

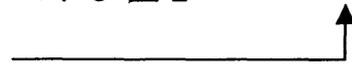
11 Category of Service (only ONE category should be checked) <input checked="" type="radio"/> Telecommunications Service <input type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions) 419/473-8372
	16 Billing Account Number (e.g., billed telephone number) 419/473-8372
12 Form 470 Application Number (15 digits) 249240000486023	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/18/2003
13 SPIN - Service Provider Identification Number (9 digits) 143001688	18 Contract Award Date (mm/dd/yyyy) 1/17/2002
	19a Service Start Date (mm/dd/yyyy) 7/1/2004
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services)
14 Service Provider Name Ameritech	20 Contract Expiration Date (mm/dd/yyyy) 1/17/2007
21 Description of This Service:	You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment # A03
22 Entity/Entities Receiving This Service:	a. If the service is site-specific (provided to one site and not shared by others), list 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, list the worksheet number (e.g., A-1): A-1

23 Calculations										
Recurring Charges					Non-Recurring Charges			Total Charges		
A	B	C	D	E	F	G	H	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)
\$1,394.31	\$255.95	\$1,138.36	12	\$13,660.32				\$13,660.32	0.44	\$6,010.54

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5: Discount Funding Request(s)

Block 5, page 7 of 14

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.
 Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly. 

FRN # _____ (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) <input checked="" type="radio"/> Telecommunications Service <input type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions)	T
	16 Billing Account Number (e.g., billed telephone number)	419/534-2002
12 Form 470 Application Number (15 digits) 249240000486023	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing)	12/18/2003
13 SPIN - Service Provider Identification Number (9 digits) 143001688	18 Contract Award Date (mm/dd/yyyy)	
	19a Service Start Date (mm/dd/yyyy)	7/1/2004
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services)	6/30/2005
14 Service Provider Name Ameritech	20 Contract Expiration Date (mm/dd/yyyy)	
21 Description of This Service:	You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment # A05	
22 Entity/Entities Receiving This Service:	a. If the service is site-specific (provided to one site and not shared by others), list 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, list the worksheet number (e.g., A-1): A-1	

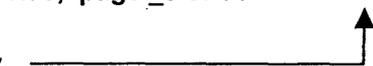
23 Calculations										
Recurring Charges					Non-Recurring Charges			Total Charges		
A	B	C	D	E	F	G	H	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)
\$58.00		\$58.00	12	\$696.00				\$696.00	0.44	\$306.24

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5: Discount Funding Request(s)

Block 5, page 9 of 14

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.

Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly. 

FRN # [REDACTED] (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) <input checked="" type="radio"/> Telecommunications Service <input type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions) T
12 Form 470 Application Number (15 digits) 249240000486023	16 Billing Account Number (e.g., billed telephone number) 419/726-3455
13 SPIN - Service Provider Identification Number (9 digits) 143001688	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/18/2003
14 Service Provider Name Ameritech	18 Contract Award Date (mm/dd/yyyy)
	19a Service Start Date (mm/dd/yyyy) 7/1/2004
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 6/30/2005
21 Description of This Service:	20 Contract Expiration Date (mm/dd/yyyy)
You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment # A07	
22 Entity/Entities Receiving This Service:	a. If the service is site-specific (provided to one site and not shared by others), list the Entity Number of the entity from Block 4 receiving this service : 034504 b. If the service is shared by all entities on a Block 4 worksheet, list the worksheet number (e.g., A-1):

23 Calculations										
Recurring Charges					Non-Recurring Charges			Total Charges		
A	B	C	D	E	F	G	H	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)
\$141.75		\$141.75	12	\$1,701.00				\$1,701.00	0.50	\$850.50

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5: Discount Funding Request(s)

Block 5, page 10 of 14

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.

Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly. 

FRN # _____ (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) <input checked="" type="radio"/> Telecommunications Service <input type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions) T 16 Billing Account Number (e.g., billed telephone number) 419/476-9138									
12 Form 470 Application Number (15 digits) 249240000486023	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/18/2003									
13 SPIN - Service Provider Identification Number (9 digits) 143001688	18 Contract Award Date (mm/dd/yyyy) 19a Service Start Date (mm/dd/yyyy) 7/1/2004 19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 6/30/2005									
14 Service Provider Name Ameritech	20 Contract Expiration Date (mm/dd/yyyy)									
21 Description of This Service:	You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment # A08									
22 Entity/Entities Receiving This Service:	a. If the service is site-specific (provided to one site and not shared by others), list the Entity Number of the entity from Block 4 receiving this service : 027946 b. If the service is shared by all entities on a Block 4 worksheet, list the worksheet number (e.g., A-1):									
23 Calculations										
Recurring Charges					Non-Recurring Charges			Total Charges		
A	B	C	D	E	F	G	H	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)
\$139.00		\$139.00	12	\$1,668.00				\$1,668.00	0.50	\$834.00

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5: Discount Funding Request(s)

Block 5, page 11 of 14

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.

Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly. ↑

FRN# (to be assigned by administrator)

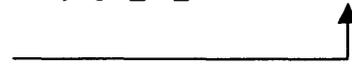
11 Category of Service (only ONE category should be checked) <input type="radio"/> Telecommunications Service <input checked="" type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions) not available
	16 Billing Account Number (e.g., billed telephone number) OC-3
12 Form 470 Application Number (15 digits) <div style="text-align: right;">249240000486023</div>	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 1/15/2002
13 SPIN - Service Provider Identification Number (9 digits) <div style="text-align: right;">143007175</div>	18 Contract Award Date (mm/dd/yyyy) 1/16/2002 19a Service Start Date (mm/dd/yyyy) 7/1/2004 19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services)
14 Service Provider Name Northern Buckeye Education Council	20 Contract Expiration Date (mm/dd/yyyy) 7/1/2007
21 Description of This Service:	You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment # A09
22 Entity/Entities Receiving This Service:	a. If the service is site-specific (provided to one site and not shared by others), list 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, list the worksheet number (e.g., A-1): A-1

23 Calculations					Recurring Charges			Non-Recurring Charges			Total Charges	
A	B	C	D	E	F	G	H	I	J	K		
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)		
\$7,417.01		\$7,417.01	12	\$89,004.12				\$89,004.12	0.44	\$39,161.81		

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5: Discount Funding Request(s)

Block 5, page 12 of 14

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.
 Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly. 

FRN # _____ (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) <input checked="" type="radio"/> Telecommunications Service <input type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions) MTM 16 Billing Account Number (e.g., billed telephone number) TOB6931
12 Form 470 Application Number (15 digits) 249240000486023	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/18/2003
13 SPIN - Service Provider Identification Number (9 digits) 143001069	18 Contract Award Date (mm/dd/yyyy) 19a Service Start Date (mm/dd/yyyy) 7/1/2004 19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 6/30/2005
14 Service Provider Name 360 Communications Co. dba Alltel	20 Contract Expiration Date (mm/dd/yyyy)
21 Description of This Service:	You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment # A10
22 Entity/Entities Receiving This Service:	a. If the service is site-specific (provided to one site and not shared by others), list the Entity Number of the entity from Block 4 receiving this service : 041046 b. If the service is shared by all entities on a Block 4 worksheet, list the worksheet number (e.g., A-1):

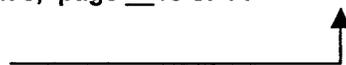
23 Calculations										
Recurring Charges					Non-Recurring Charges			Total Charges		
A	B	C	D	E	F	G	H	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)
\$930.00	\$678.00	\$252.00	12	\$3,024.00				\$3,024.00	0.40	\$1,209.60

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5: Discount Funding Request(s)

Block 5, page 13 of 14

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.

Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly. 

FRN# (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) <input type="radio"/> Telecommunications Service <input checked="" type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions)	00002
	16 Billing Account Number (e.g., billed telephone number)	00002
12 Form 470 Application Number (15 digits) 249240000486023	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing)	12/18/2003
13 SPIN - Service Provider Identification Number (9 digits) 143005290	18 Contract Award Date (mm/dd/yyyy)	5/10/1996
	19a Service Start Date (mm/dd/yyyy)	7/1/2004
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services)	
14 Service Provider Name Buckeye Telesystem, Inc.	20 Contract Expiration Date (mm/dd/yyyy)	10/1/2006

21 Description of This Service: You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below.
Attachment # A-11

22 Entity/Entities Receiving This Service:
 a. If the service is site-specific (provided to one site and not shared by others), list 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, list the worksheet number (e.g., A-1): A-1

23 Calculations				Recurring Charges			Non-Recurring Charges			Total Charges	
A	B	C	D	E	F	G	H	I	J	K	
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)	
\$4,250.00		\$4,250.00	12	\$51,000.00				\$51,000.00	0.44	\$22,440.00	

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5: Discount Funding Request(s)

Block 5, page 14 of 14

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly. 

FRN# (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) <input checked="" type="radio"/> Telecommunications Service <input type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions)	MTM
	16 Billing Account Number (e.g., billed telephone number)	0008-002-5620
12 Form 470 Application Number (15 digits) 249240000486023	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing)	12/18/2003
13 SPIN - Service Provider Identification Number (9 digits) 143015548	18 Contract Award Date (mm/dd/yyyy)	
	19a Service Start Date (mm/dd/yyyy)	7/1/2004
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services)	6/30/2005
14 Service Provider Name WorldCom dba TTI National	20 Contract Expiration Date (mm/dd/yyyy)	

21 Description of This Service: You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below.
Attachment # A-12

22 Entity/Entities Receiving This Service:
 a. If the service is site-specific (provided to one site and not shared by others), list 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, list the worksheet number (e.g., A-1): A-1

23 Calculations										
Recurring Charges					Non-Recurring Charges			Total Charges		
A	B	C	D	E	F	G	H	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)
\$331.00		\$331.00	12	\$3,972.00				\$3,972.00	0.44	\$1,747.68

Do not write in this area

Entity Number 129311 Applicant's Form Identifier WLS72004
Contact Person Dave Bringman Phone Number 419/473-8228

Block 6: Certifications and Signature

- 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 schools, including, but not limited to, elementary and secondary schools, colleges, or 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 and long 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 procurement 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 this 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 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.

34 Signature of authorized person <i>David L. Bringman</i>	35 Date <i>2-2-04</i>
36 Printed name of authorized person Dave Bringman	
37 Title or position of authorized person Director, Business Services	
38 Telephone number of authorized person: (419) 473-8228	

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.

Entity Number 129311 Applicant's Form Identifier WLS72004
Contact Person Dave Bringman Phone Number 419/473-8228

NOTICE TO INDIVIDUALS: Section 54.504 of the Federal Communications 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 service 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 or a 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 the information to these agencies through the matching of computer records when authorized.

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. 93-579, December 31, 1974, 5 U.S.C. § 552, and 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 4 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 for reducing the reporting burden to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, DC 20554.

Please submit this form to:

**SLD-Form 471
P.O. Box 7026
Lawrence, Kansas 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, Kansas 66046
(888) 203-8100**

Entity Number 129311 Applicant's Form Identifier WLS72004
 Contact Person Dave Bringman Phone Number 419-473-8228

Block 5

Services	Bill number	Provider	Attachment #	Monthly Cost	Number of lines
Centrex lines used by all sites	419/531-2235	Ameritech	A01	\$171.00	6
Centrex lines used by all sites	419/473-1281	Ameritech	A02	\$1,696.00	56
DID service used by all sites	419/473-8272	Ameritech	A03	\$1,138.36	T-1 with 24 DID trunks, DID #s
analog circuit used by all sites	419/R60-0430	Ameritech	A04	\$422.00	8
modem lines to dial into for all sites	419/534-2002	Ameritech	A05	\$58.00	2
basic service for Whitmer (entity 041046)	419/473-2364	Ameritech	A06	\$43.00	1
basic service for Shoreland (entity 034504)	419/726-3455	Ameritech	A07	\$141.75	3
basic service for Greenwood (entity 027946)	419/476-9138	Ameritech	A08	\$139.00	3
internet access for all sites	OC3	Northern Buckeye	A09	\$7,417.01	
cellular service for 2 principals and 1 superintendent (041046)	TOB6931	Alltel	A10	\$252.00	3
11 leased lines for internet access	00002	Buckeye	A11	\$4,250.00	11
long distance service for all sites	0008-002-5620	TTI National	A12	\$331.00	75
Total				\$16,059.12	



WASHNTN LOC SCHLS
%BOOKKEEPING DEPT
3505 W UNCLNSHR BL
TOLEDO, OH 43608-1231

Page 1 of 2
Account Number 419 531-2235 3557
Billing Date Jun 1, 2003

Web Site www.ameritech.com

Invoice Number 419531223508

2309134

Monthly Statement

May 2 - Jun 1, 2003

Bill-At-A-Glance

Previous Bill	172.95
Payment - Thank You!	172.95CR
Adjustments	.00
Balance	.00
Current Charges	171.33
Total Amount Due	\$171.33
Current Charges Due in Full By	Jun 24, 2003

Ameritech Local Service

Monthly Service - Jun 1 thru Jun 30

Monthly Charges	155.09
Federal Access Charge	32.28
Total Monthly Service	187.37

Local, State and Federal Charges

9-1-1 Emergency System	
Billed for Lucas County	.72
Number Portability Surcharge	1.68
Federal Universal Service Fee	.60
Ohio Educational Discount	19.04CR
Total Local, State and Federal Charges	16.04CR

Total Ameritech Local Service Charges 171.33

Billing Summary

Questions? Call:

Ameritech Local Service	171.33
1-800-480-8088	
Repair Service:	
1-800-480-8088	
Telecommunications Relay System:	
1-800-750-0750	
Total of Current Charges	171.33

BBM
6/10/03

JUN 10 2003

A01

News You Can Use - Summary

- AVOID DISCONNECTION
 - EDUCATIONAL DISCOUNT
 - CALLER ID AVAILABLE
 - CARRIER INFO
 - PAYMENTS & INQUIRIES
- See "News You Can Use" for additional information.



pening

WASHNTN LOC SCHLS
%800KKEEPING DEPT
3505 W LINCLNSHR BL
TOLEDO, OH 43608-1231

Page 1 of 25
Account Number 419 473-1281 448 0
Billing Date Jun 1, 2003

Web Site www.ameritech.com

Invoice Number 419473128106

2309134

Monthly Statement

May 2 - Jun 1, 2003

Bill-At-A-Glance

Previous Bill	1,687.04
Payment - Thank You!	1,687.04CR
Adjustments	.00
Balance	.00
Current Charges	1,696.07
Total Amount Due	\$1,696.07
Current Charges Due In Full By	Jun 23, 2003

Billing Summary

Questions? Call:

Ameritech Local Service 1-800-480-8088	1,692.33
Repair Service: 1-800-480-8088	
Telecommunications Relay System: 1-800-750-0750	
MCI 1-800-480-8088	3.74
Total of Current Charges	1,696.07

*Billing Summary
6/10/03*

Ameritech Local Service

Monthly Service - Jun 1 thru Jun 30

Monthly Charges	1,270.25
Federal Access Charge	301.28
Total Monthly Service	1,571.53

Local Calls

Local Calling Plus

Calling Area B

Minutes - Initial - 8:00am-9:00pm - Mon thru Fri	
10 Minute(s) billed at \$.0406 each	.41
Minutes - Additional	
29 Minute(s) billed at \$.0104 each	.30
Total Usage for Calling Area B	.71

Calling Area C

Minutes - Initial - 8:00am-9:00pm - Mon thru Fri	
23 Minute(s) billed at \$.0406 each	.93
Minutes - Additional	
47 Minute(s) billed at \$.0104 each	.49
Total Usage for Calling Area C	1.42
Total Local Calling Plus Charges	2.13
39947 Call(s) Made on Measured Line	
438 Call(s) Allowed with Trunk Equivalency	
3080 Call(s) School Cap	
3080 Call(s) Billed at \$.08 each	246.40
Total Local Calls	248.53

Information Charges

411 and 555-1212	
16 Call(s) made to 1+411	
17 Call(s) made to 1+555-1212	
33 Call(s) billed at \$.75 each	24.75

Information Call Completion

3 Call(s) billed at \$.25 each	.75
--------------------------------	-----

National Directory Assistance

5 Call(s) billed at \$1.25 each	6.25
Total Information Charges	31.75

Local Toll

No.	Date	Time	Place Called	Number	Code	Min
Calls Charged to 419 473-1281						
1100 Call(s) Made on Measured Line						
(F.Y.I. - \$88.00 before volume discounts)						

News You Can Use - Summary

- AVOID DISCONNECTION
- EDUCATIONAL DISCOUNT
- CALLER ID AVAILABLE
- CARRIER INFO
- PAYMENTS & INQUIRIES

See "News You Can Use" for additional information.

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WASHNTN LOC SCHLS
 %BOOKKEEPING DEPT
 3505 W UNCLNSHR BL
 TOLEDO, OH 43608-1231

Page 1 of 5
 Account Number 419 473-8372 711 6
 Billing Date Jun 1, 2003

Web Site www.ameritech.com

Invoice Number 419473837206

JUN 12 2003

Monthly Statement

May 2 - Jun 1, 2003

Bill-At-A-Glance

Previous Bill	1,393.93
Payment - Thank You!	1,393.93CR
Adjustments	.00
Balance	.00
Current Charges	1,394.31
Total Amount Due	\$1,394.31
Current Charges Due in Full By	Jun 23, 2003

Billing Summary

Questions? Call:

Ameritech Local Service	1,138.36
1-800-480-8088	
Repair Service:	
1-800-480-8088	
Telecommunications Relay System:	
1-800-750-0750	
Ameritech Yellow Pages	196.00
1-800-647-9000	
Integretel, Inc.	35.90
1-800-736-7500	
OAN Services, Inc.	17.95
1-800-441-9678	
Correctional Billing Services	6.10
1-800-844-6591	
Total of Current Charges	1,394.31

News You Can Use - Summary

- AVOID DISCONNECTION
 - EDUCATIONAL DISCOUNT
 - PAYMENTS & INQUIRIES
 - CALLER ID AVAILABLE
- See "News You Can Use" for additional information.

Ameritech Local Service

Monthly Service - Jun 1 thru Jun 30

Monthly Charges **1,238.38**

Other Charges and Credits

This section of your bill reflects charges and credits resulting from account activity.

Item No.	Description	Quantity	USOC	Monthly Charges
Date: May 16, 2003				
Order Number: R1303581445				
Services Changed				
Charges for Services Added				
(Monthly Charges are Prorated from May 17, 2003 to Billing Date, Jun 1, 2003)				
1.	Additional Directory Listing	1	CLT	1.99 .93
2.	Additional Directory Listing	1	CLT	1.99 .93
Services Changed				
Credits for Services Removed				
(Monthly Charges were Billed in Advance and are Prorated from May 17, 2003 to Jun 1, 2003)				
3.	Additional Directory Listing	1	CLT	1.99 .93CR
4.	Additional Directory Listing	1	CLT	1.99 .93CR
5.	Additional Directory Listing	1	CLT	1.99 .93CR
6.	Additional Directory Listing	1	CLT	1.99 .93CR
Total Credits for Order Number: R1303581445				1.86CR

Date: May 29, 2003

Order Number: R1303582139

Item No.	Description	Quantity	USOC	Monthly Charges
Services Changed				
Charges for Services Added				
(Monthly Charges are Prorated from May 30, 2003 to Billing Date, Jun 1, 2003)				
7.	Additional Directory Listing	1	CLT	1.99 .07
8.	Additional Directory Listing	1	CLT	1.99 .07
Total Charges for Order Number: R1303582139				.14
Total Other Charges and Credits				1.72CR

Local, State and Federal Charges

FCC Complex Line Port Federal Charge	28.18
Ohio Educational Discount	126.48CR
Total Local, State and Federal Charges	98.30CR

Total Ameritech Local Service Charges 1,138.36

Ameritech Yellow Pages

Yellow Pages Advertising
 TOLEDO OH

91.00

A03



WASHINGTON LOCAL
SCHOOLS
3505 LINCOLNSHIRE BL
TOLEDO, OH 43608

Page 1 of 1
Account Number 419 R60-0430 662 4
Billing Date May 13, 2003

Web Site www.ameritech.com

Invoice Number 419R60043005

Monthly Statement

Apr 14 - May 13, 2003

Bill-At-A-Glance

Previous Bill	439.47
Payment - Thank You!	439.47CR
Adjustments	.00
Balance	.00
Current Charges	422.19
Total Amount Due	\$422.19
Current Charges Due in Full By	Jun 4, 2003

Billing Summary

Questions? Call:

Ameritech Local Service	422.19
1-800-480-8088	
Repair Service:	
1-800-480-8088	
Telecommunications Relay System:	
1-800-750-0750	
Total of Current Charges	422.19

Ameritech Local Service

Monthly Service - May 13 thru Jun 12

Monthly Charges	469.10
Local, State and Federal Charges	
Ohio Educational Discount	46.91CR
Total Ameritech Local Service Charges	422.19

News You Can Use

AVOID DISCONNECTION

All of the charges must be paid each month to keep your account current and avoid collection activities. However, certain charges MUST be paid in order to avoid disconnection of basic local service. Currently, for this account that amount is \$422.19.

EDUCATIONAL DISCOUNT

The Ohio Educational Discount of 10% has been applied to your current Ameritech charges of \$469.10, saving you \$46.91.

PAYMENTS & INQUIRIES

Allow 5 days when paying by mail. You may also pay at an authorized agent. Nonpayment of toll or non-regulated services may result in disconnection or restriction of such services and/or collection action. For problems with your business service please call us at 1-800-480-8088. If your questions are not resolved after you have called SBC, you may call the Public Utilities Commission of Ohio (PUCO), Toll Free at 1-800-686-7826 or 1-614-466-3292, or for TDD/TTY Toll Free at 1-800-686-1570 or 1-614-466-8180, from 8 a.m. to 5 p.m. M-F, or visit the PUCO website at www.puco.ohio.gov.

SBC VITAL CONNECTIONS

Visit "SBC Vital Connections" for tips on staying connected in a crisis. Go to www.sbc.com/vitalconnections to learn about and create a personal and family communications plan. SBC recently donated \$250,000 to the Veterans of Foreign Wars' Operation Uplink program, to fund prepaid calling cards for our troops. To send a calling card or donate to the VFV, visit sbccom.

404

News You Can Use - Summary

- AVOID DISCONNECTION
 - EDUCATIONAL DISCOUNT
 - PAYMENTS & INQUIRIES
 - SBC VITAL CONNECTIONS
- See "News You Can Use" for additional information.



WASHNTN LOC SCHLS
 %BOOKKEEPING
 3505 W LINCOLNSHIRE BL
 TOLEDO, OH 43606-1231

Page 1 of 2
 Account Number 419 534-2002 523 5
 Billing Date May 25, 2003

Web Site www.ameritech.com

Invoice Number 419534200205

Monthly Statement

Apr 26 - May 25, 2003

Bill-At-A-Glance

Previous Bill	58.90
Payment - Thank You!	58.90CR
Adjustments	.00
Balance	.00
Current Charges	58.84
Total Amount Due	\$58.84
Current Charges Due in Full By	Jun 18, 2003

Billing Summary

Questions? Call:

Ameritech Local Service	58.84
1-800-480-8088	
Repair Service:	
1-800-480-8088	
Telecommunications Relay System:	
1-800-750-0750	
Total of Current Charges	58.84

Ameritech Local Service

Monthly Service - May 25 thru Jun 24

Charges for 419 534-2002	
Monthly Charges	26.40
Federal Access Charge	5.38

Charges for 419 534-2004	
Monthly Charges	26.40
Federal Access Charge	5.38
Total Monthly Service	63.56

Local, State and Federal Charges

9-1-1 Emergency System	
Billed for Lucas County	.24
Number Portability Surcharge	.56
Federal Universal Service Fee	1.02
Ohio Educational Discount	6.54CR
Total Local, State and Federal Charges	4.72CR

Total Ameritech Local Service Charges 58.84

JUN 09 2003

A05

Bobbin
6/10/03

News You Can Use - Summary

- AVOID DISCONNECTION
 - EDUCATIONAL DISCOUNT
 - SBC VITAL CONNECTIONS
 - CARRIER INFO
 - PAYMENTS & INQUIRIES
- See "News You Can Use" for additional information.



WASH LOC 80 OF ED
%800KEEPING-ABLE
3505 W LINCOLNSHIRE BL
TOLEDO, OH 43608-1231

Page 1 of 2
Account Number 419 473-2364 377 9
Billing Date Jun 1, 2003

Web Site www.ameritech.com

Invoice Number 419473236406

JUN 12 2003

Monthly Statement

May 2 - Jun 1, 2003

Bill-At-A-Glance

Previous Bill	43.14
Payment - Thank You!	43.14CR
Adjustments	.00
Balance	.00
Current Charges	43.10
Total Amount Due	\$43.10
Current Charges Due in Full By	Jun 23, 2003

Billing Summary

Questions? Call:

Ameritech Local Service	43.10
1-800-480-8088	
Repair Service:	
1-800-480-8088	
Telecommunications Relay System:	
1-800-750-0750	
Total of Current Charges	43.10

Ameritech Local Service

Monthly Service - Jun 1 thru Jun 30

CO Termination With Touchtone	2.30
Line Charge	17.95
Individual Message Business	8.15
Federal Access Charge	5.38
Total Monthly Service	31.78

Local Calls

483 Call(s) were placed with your Measured Line	
73 Call(s) were allowed	
190 Call(s) billed at \$.08 each	15.20

Local, State and Federal Charges

9-1-1 Emergency System	.12
Billed for Lucas County	.28
Number Portability Surcharge	.51
Federal Universal Service Fee	4.79CR
Ohio Educational Discount	3.88CR
Total Local, State and Federal Charges	9.58

Total Ameritech Local Service Charges 43.10

*Placed service
not available*

A06

News You Can Use - Summary

- AVOID DISCONNECTION
- EDUCATIONAL DISCOUNT
- CALLER ID AVAILABLE
- CARRIER INFO
- PAYMENTS & INQUIRIES

See "News You Can Use" for additional information.



WASHNTN LOC SCHLS
 %BOOKKEEPING DEPT
 3505 W LINCLNSHR BL
 TOLEDO, OH 43606-1231

Page 1 of 2
 Account Number 419 726-3455 4917
 Billing Date Dec 13, 2003

Web Site www.sbc.com

Invoices Number 419726345512

Monthly Statement

Nov 14 - Dec 13, 2003

Bill At-A-Glance

Previous Bill	140.78
Payment - Thank You!	140.78CR
Adjustments	.00
Balance	.00
Current Charges	141.75
Total Amount Due	\$141.75 ✓
Current Charges Due in Full By	Jan 5, 2004

SBC Local Services

Monthly Service - Dec 13 thru Jan 12	
Charges for 419 726-3455	
Monthly Charges	30.10
Federal Access Charge	5.39
Charges for 419 726-3456	
Monthly Charges	30.10
Federal Access Charge	5.39
Charges for 419 726-3457	
Monthly Charges	30.10
Federal Access Charge	5.39
Total Monthly Service	106.67

Billing Summary

Questions? Call:

SBC Local Services	141.75
1-800-650-3000	
Repair Services:	
1-800-727-2273	
Telecommunications Relay System:	
1-800-750-0750	
Total of Current Charges	141.75

Local Calls	
Local Calling Plus	
Calling Area C	
Minutes - Initial - 8:00am-9:00pm - Mon thru Fri	
8 Minute(s) billed at \$.0408 each	.32
Minutes - Additional	
10 Minute(s) billed at \$.0104 each	.10
Total Usage for Calling Area C	.42
Total Local Calling Plus Charges	.42
2042 Call(s) were placed with your Measured Line	
219 Call(s) were allowed	
570 Call(s) billed at \$.08 each	45.60

Pay Per Use Services		
No.	Date Time	Number
Repeat Dialing		
1	11-21 341P	419 726-2924
		.75
Total Pay Per Use Services		.75
Total Local Calls		46.77

Information Charges	
411 and 555-1212	
2 Call(s) made to 1-411	
2 Call(s) billed at \$.75 each	1.50

Local, State and Federal Charges	
9-1-1 Emergency System	
Billed for Lucas County	.38
Number Portability Surcharge	.84
Federal Universal Service Fee	1.56
Ohio Educational Discount	15.75CR
Total Local, State and Federal Charges	12.93CR

Total SBC Local Services Charges 141.75

A07

News You Can Use - Summary

- AVOID DISCONNECTION
 - EDUCATIONAL DISCOUNT
 - CARRIER INFO
 - PAYMENTS & INQUIRIES
- See "News You Can Use" for additional information.



WASHNTN LOC SCHLS
%800KEEPING DEPT
3505 W LINCLNSHR BL
TOLEDO, OH 43608-1231

Page 1 of 2
Account Number 419 476-9138 496 0
Billing Date Jun 1, 2003

Web Site www.ameritech.com

Invoice Number 419476913806

Monthly Statement

May 2 - Jun 1, 2003

Bill-At-A-Glance

Previous Bill	140.75
Payment - Thank You!	140.75CR
Adjustments	.00
Balance	.00
Current Charges	139.29
Total Amount Due	\$139.29
Current Charges Due in Full By	Jun 23, 2003

Billing Summary

Questions? Call:

Ameritech Local Service	139.29
1-800-480-8088	
Repair Service:	
1-800-480-8088	
Telecommunications Relay System:	
1-800-750-0750	
Total of Current Charges	139.29

*Not cleared
monitored*

Ameritech Local Service

Monthly Service - Jun 1 thru Jun 30	
Charges for 419 476-9138	
Monthly Charges	30.10
Federal Access Charge	5.38
Charges for 419 476-9139	
Monthly Charges	30.10
Federal Access Charge	5.38
Charges for 419 476-9923	
Monthly Charges	30.10
Federal Access Charge	5.38
Total Monthly Service	106.44

Local Calls	
1992 Call(s) were placed with your Measured Line	
219 Call(s) were allowed	
570 Call(s) billed at \$.08 each	45.60

Local, State and Federal Charges	
9-1-1 Emergency System	
Billed for Lucas County	.36
Number Portability Surcharge	.84
Federal Universal Service Fee	1.53
Ohio Educational Discount	15.48CR
Total Local, State and Federal Charges	12.75CR
Total Ameritech Local Service Charges	139.29

JUN 12 2003
A08

News You Can Use - Summary

- AVOID DISCONNECTION
 - EDUCATIONAL DISCOUNT
 - CALLER ID AVAILABLE
 - CARRIER INFO
 - PAYMENTS & INQUIRIES
- See "News You Can Use" for additional information.

Item 21 Attachment

Applicant: Washington Local School District		Attachment: I-A21		
BEN: 129311		Application:		
<p>Narrative Description: Northern Buckeye Education Council will provide unbundled Internet Access to Customer. This service offering includes Internet access, e-mail accounts for district personnel, Domain Name Services, and caching services. Service to be delivered to the Customer over a dedicated connection with a minimum transfer rate of 1.544mbs.</p>				
Quantity	Product or Service Description	Unit Cost	Extended Pre-discount Cost	
			Recurring	Non-Recurring
12	Monthly Internet Access to Career & Tech Center	\$4,867.01	\$58,404.14	
12	Monthly Internet Access to Whitmer High School	\$212.50	\$2,550.00	
12	Monthly Internet Access to Jefferson Junior High School	\$212.50	\$2,550.00	
12	Monthly Internet Access to Washington Junior High School	\$212.50	\$2,550.00	
12	Monthly Internet Access to Greenwood Junior High School	\$212.50	\$2,550.00	
12	Monthly Internet Access to Hiawatha Elementary School	\$212.50	\$2,550.00	
12	Monthly Internet Access to Jackman Elementary School	\$212.50	\$2,550.00	
12	Monthly Internet Access to McGregor Elementary School	\$212.50	\$2,550.00	
12	Monthly Internet Access to Meadowvale Elementary School	\$212.50	\$2,550.00	
12	Monthly Internet Access to Monac Elementary School	\$212.50	\$2,550.00	
12	Monthly Internet Access to Shoreland Elementary School	\$212.50	\$2,550.00	
12	Monthly Internet Access to Trilby Elementary School	\$212.50	\$2,550.00	
12	Monthly Internet Access to Wernert Elementary School	\$212.50	\$2,550.00	
TOTAL			\$89,004.14 ✓	

A09



Account Summary

Previous Charges

Previous Balance as of 11/17/03		\$1,765.37
Payments and Adjustments		
• Payment - Thank you - 10/28/03	\$1,765.37 CR	
• Taxes Misc - 11/04/03	\$25.00 CR	
Total Payments and Adjustments		\$1,790.37 CR
Balance Forward		\$25.00 CR

Current Charges and Credits

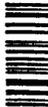
Monthly Service Charges	\$930.14	
Taxes	\$.00	
Airtime and Long Distance Charges	\$604.47	
Group Usage Total 571.5 Min		
Airtime Free 390.0 Min		
Airtime Day 156.0 Min		
Airtime Evening 25.5 Min		
Reg Cost Rcvry Fee	\$6.56	
Telcom Cnctvty Fee	\$9.44	
Federal USF	\$38.10	
Equipment Charges	\$844.35	
Total Current Charges and Credits		\$2,433.06

TOTAL BALANCE DUE \$2,408.06

A10

Current Charges for All Subscribers

	Monthly Service Charges	Other Charges & Credits	Taxes	Airtime & Dir. Assist Charges	Long Distance Charges	Roaming Charges	Total
WIRELESS (419) 250-0338 Washington Local	\$57.00	\$2.47	\$.00	\$.00	\$.00	\$.00	\$59.47
WIRELESS (419) 261-0501 Washington Local	\$129.85	\$423.72	\$.00	\$.00	\$.80	\$1.18	\$555.55
WIRELESS (419) 261-0595 Washington Local	\$20.06	\$3.11	\$.00	\$18.00	\$10.80	\$30.69	\$82.66
WIRELESS (419) 261-0832 Washington Local	\$131.95	\$4.43	\$.00	\$.00	\$.00	\$.00	\$136.38
WIRELESS (419) 261-0891 Washington Local	\$25.95	\$108.01	\$.00	\$4.00	\$.00	\$.00	\$137.96
WIRELESS (419) 261-0971 Washington Local	\$23.43	\$3.56	\$.00	\$10.26	\$21.60	\$46.53	\$105.38



Current Charges for All Subscribers

A104

	Monthly Service Charges	Other Charges & Credits	Taxes	Airtime & Dir. Assist Charges	Long Distance Charges	Roaming Charges	Total
Ⓟ WIRELESS (419) 261-0993 Washington Local	\$25.95	\$216.05	\$0.00	\$18.75	\$16.00	\$39.60	\$316.35
Ⓟ WIRELESS (419) 261-1172 Washington Local	\$53.85	\$2.18	\$0.00	\$0.00	\$0.00	\$0.00	\$56.03
* Ⓟ WIRELESS (419) 261-7592 Washington Local Sch	\$36.85	\$1.86	\$0.00	\$0.00	\$0.00	\$0.00	\$38.71
Ⓟ WIRELESS (419) 261-8949 Washington Local	\$80.23	\$8.32	\$0.00	\$0.00	\$27.75	\$174.89	\$291.19
Ⓟ WIRELESS (419) 261-9096 Richard Ball	\$21.75	\$1.29	\$0.00	\$0.00	\$0.00	\$0.00	\$23.04
Ⓟ WIRELESS (419) 360-0256 Washington Local	\$25.95	\$108.25	\$0.00	\$0.00	\$5.47	\$7.67	\$147.34
Ⓟ WIRELESS (419) 360-2107 Washington Local	\$82.04	\$5.78	\$0.00	\$0.00	\$9.10	\$96.38	\$193.30
* Ⓟ WIRELESS (419) 360-2108 Washington Local	\$82.77	\$4.58	\$0.00	\$0.00	\$10.85	\$49.04	\$147.24
Ⓟ WIRELESS (419) 360-8901 Washington Local	\$76.96	\$3.04	\$0.00	\$0.00	\$0.00	\$4.96	\$84.96
Ⓟ WIRELESS (419) 460-3913 Washington Local Sch	\$20.80	\$1.40	\$0.00	\$0.00	\$1.15	\$0.00	\$22.35
Ⓧ PAGING (419) 449-0145 Washington Local	\$6.95	\$0.08	\$0.00	\$0.00	\$0.00	\$0.00	\$7.03
Ⓧ PAGING (419) 449-0146 Washington Local	\$6.95	\$0.08	\$0.00	\$0.00	\$0.00	\$0.00	\$7.03
Ⓧ PAGING (419) 449-0147 Washington Local	\$6.95	\$0.08	\$0.00	\$0.00	\$0.00	\$0.00	\$7.03
Ⓧ PAGING (419) 449-3198 Washington Local	\$6.95	\$0.08	\$0.00	\$0.00	\$0.00	\$0.00	\$7.03
Ⓧ PAGING (419) 449-5227 Washington Local	\$6.95	\$0.08	\$0.00	\$0.00	\$0.00	\$0.00	\$7.03
TOTAL	\$930.14	\$398.45	\$0.00	\$51.01	\$102.52	\$450.94	\$2,433.05

Please note that applicable surcharges and taxes on roaming are included in the "Roaming Charges" column above. They do not appear in

Jan. 30. 2004 8:42AM WASHINGTON LOCAL SD

419,111-0002
00002

No. 8470 P. 2

BUCKEYE
TELESYSTEM.

4818 Angola Rd.
Toledo, Ohio 43615

(419) 724-9898
1-888-21FIBER

WASHINGTON LOCAL SCHOOLS

PAGE 1 OF 2

PAYMENTS RECEIVED AFTER JAN 7. ARE NOT INCLUDED

PREVIOUS BALANCE	PREVIOUS PAYMENTS	BALANCE FORWARD	CURRENT CHARGES	AMOUNT DUE
\$8,500.00	\$8,500.00	\$0.00	\$4,250.00	\$4,250.00

BILLING DATE	DELINQUENT AFTER
JAN 8, 2004	JAN 27, 2004

THANK YOU FOR BEING A CUSTOMER OF BUCKEYE TELESYSTEM.

2404861

CUSTOMER SUMMARY

BUCKEYE-CAP CURRENT CHARGES

MONTHLY SERVICE FROM JAN 8 THRU FEB 7 4,250.00

OTHER CHARGES/CREDITS .00

TOTAL AMOUNT DUE PLEASE PAY THIS AMOUNT \$4,250.00

BUCKEYE
TELESYSTEM.



FOR BILLING INQUIRIES PLEASE CALL 419-724-9898 7:00AM TO 7:00PM
MONDAY THROUGH FRIDAY. THANK YOU.

KEEP THIS PORTION FOR YOUR RECORD

All



National, Inc

20855 STONE OAK PARKWAY
SAN ANTONIO TX 78258

230 8888

2747

STATEMENT SUMMARY

BILL DATE 05/22/03
ACCOUNT NO. 200512199
INVOICE NO. 20051219921
REGION/LOC TXX/A1C
0200512199 N2 X17 C21 A 00216 B

WASHINGTON LOCAL SCHOOL DIST.
3505 W LINCOLN SHIRE BLVD
TOLEDO OH 43606

PREVIOUS BALANCE	\$242.52
PAYMENTS RECEIVED THANK YOU	242.52CR
ADJUSTMENTS	0.00
BEGINNING BALANCE	\$0.00
NEW USAGE CHARGES	265.14
RECURRING CHARGES	50.05
NON-RECURRING CHARGES	0.00
FEDERAL EXCISE TAX	0.00
STATE AND LOCAL TAXES	0.00
FED. ST & LOCAL SURCHARGES	1.98
FED UNIVERSAL SERVICE FEE	14.65
SERVICE CHARGE	0.00
SUBTOTAL NEW CHARGES	\$331.82

Bonnie
5/30/03

PLEASE PAY THIS AMOUNT BY 08/11/03 **\$331.82**

CUSTOMER SERVICE 1-800-893-5094
CREDIT/COLLECTIONS 1-800-853-4495

A12

Your invoice is printed on recycled paper as part of our commitment to reducing cost and waste, conserving natural resources and promoting a sustainable environment. Please always check the last page of your invoice for additional important messages. And thank you for using TTI National. We appreciate your business!

001.2430.490