

EAST ST. LOUIS SCHOOL DISTRICT 189
Tuesday, January 18, 2000

REGULAR BOARD MEETING
6:00 P.M.

AGENDA

- 1. Call Meeting to Order**
- 2. Prayer**
- 3. Pledge of Allegiance**
- 4. Roll Call**
- 5. Adoption of Official Agenda Giving the President Discretion to Take Items Out of Order or in Executive Session**
- 6. Approval of Previous Minutes – December 20, 1999**
- 7. Correspondence**
- 8. Presentations:**
- 9. Report of Board Committees**
 - a. Committee on Audit**
 - b. Committee on Policy**
 - c. Committee on Curriculum**
 - d. Committee on Buildings & Grounds – plus**
 - Addendum (use of Hawthorne School's cafeteria on Saturday, March 11, 2000 at 3:00 p.m. – Annual Youth Symposium)**
 - e. Committee on Finance**
- 10. Executive Session – To discuss student expulsions, matters of litigation, and information regarding the appointment, employment, or dismissal of employees.**
- 11. Report of Superintendent**
 - a. Update of Projects and Activities**
 - b. Presentation of Personnel Items**
 - c. Presentation of Financial Items – Parts A – I**
- 12. Report of Legal Department**
- 13. Old Business**
- 14. New Business**
- 15. Announcements**
- 16. Public Comments from individuals who have requested to address the Board**
- 17. Adjournment**

Nathaniel J. Anderson, Ed.D., Superintendent
Lonzo Greenwood, President
Irma Golliday, Secretary

**OFFICIAL PROCEEDINGS OF THE
EAST ST. LOUIS BOARD OF EDUCATION
SCHOOL DISTRICT 189
COUNTY OF ST. CLAIR AND STATE OF ILLINOIS**

REGULAR BOARD MEETING

Tuesday, January 18, 2000

6:00 p.m.

**MEETING CALLED
TO ORDER:**

The meeting was called to order at 6:00 p.m. by the President, Mr. Lonzo Greenwood, who read the notice calling the meeting.

PRAYER & PLEDGE:

Ms. LaVondia Neely led Prayer, and Mr. Joseph Lewis led the Pledge of Allegiance.

ROLL CALL:

Mrs. Irma Golliday, Board Secretary, called the roll.

PRESENT:

**GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY,
WILLIAMS**

ABSENT:

MORRIS

AGENDA ADOPTED:

MR. LEWIS made the motion and MRS. GOLLIDAY seconded the motion to adopt the official agenda giving the President discretion to take items out of order or in Executive Session. The motion carried as follows:

AYES:

**GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY,
WILLIAMS**

ABSENT:

MORRIS

**APPROVAL OF
MINUTES:**

MR. WILLIAMS made the motion and MRS. GOLLIDAY seconded the motion to approve the minutes of December 20, 1999. The motion carried as follows:

AYES:

**GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY,
WILLIAMS**

ABSENT:

MORRIS

REPORT OF BOARD STANDING COMMITTEES:

AUDIT COMMITTEE -- Dr. LaRONA J. MORRIS

No Report

POLICY COMMITTEE – MS. LaVONDIA NEELY

No Report

CURRICULUM COMMITTEE – MRS. IRMA GOLLIDAY

Mrs. Golliday stated that Mr. Fonzy Coleman, Principal of East St. Louis Senior High School, attended the Curriculum Committee meeting and presented the school's improvement plan. Hopefully, scores will be brought up with the implementation of the plan.

Mrs. Golliday requested approval of the School Improvement Plan from the high school and also requested waiver of Physical Education requirements for 14 year old EMH students at the high school.

Superintendent Anderson recommended approval of the above requests from the Curriculum Committee.

MS. NEELY made the motion and MR. LEWIS seconded the motion to concur with the recommendation of Superintendent Anderson. The motion carried as follows:

AYES: GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY,
WILLIAMS
ABSENT: MORRIS

Mrs. Golliday stated the Curriculum Committee, through Dr. Stephanie Carpenter, was setting up a presentation from the Edison School Project for the second Wednesday in February.

Dr. Carpenter stated the meeting with the Edison School Project would be held on Monday, January 31, at the high school.

Dr. Anderson stated the public is invited. More information would be given. An announcement had been placed in the paper for a town meeting held at the high school concerning the Edison Project. Dr. Anderson stated he had met with Local 1220 representatives concerning the Project.

BUILDINGS AND GROUNDS COMMITTEE – KHALIL EL-AMIN

Mr. Lewis stated the reports from the Director of Buildings and Grounds and the Supervisor of Custodians were presented as informational only.

- The Committee requested approval of the Resolution providing for and requiring the submission of the proposition to build and equip school buildings to the voters of School

District 189 at the general primary election to be held on March 21, 2000. (The passage of this resolution will not result in the increase of taxes to residents.)

Superintendent Anderson recommended the Board adopt the Resolution.

MR. LEWIS made the motion and MS. NEELY seconded the motion to concur with the recommendation of Superintendent Anderson. The motion carried as follows:

**AYES: GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY,
WILLIAMS**
ABSENT: MORRIS

The Buildings and Grounds Committee requested approval of the following items:

- **Professional Design Services from Kennedy Associates for HVAC Systems upgrade for the following schools: Alta Sita, Davis, Jackson, Lilly-Freeman, McHenry, Brown, Hawthorne, Jones, Mandela, and Neely. The estimated cost is \$1,773,391.**
- **Window replacement and exterior upgrades for the schools named above. Estimated cost is \$3,304,733.**
- **Agreement with Kennedy Associates to provide services required for establishing a "toolbox" of architectural and structural design firms for use by District 189 at a cost of \$4,500.**

Superintendent Anderson recommended approval of the above requests from the Buildings and Grounds Committee.

MR. LEWIS made the motion and MR. EL-AMIN seconded the motion to concur with the recommendations of Superintendent Anderson. The motion carried as follows:

**AYES: GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY,
WILLIAMS**
ABSENT: MORRIS

- **The Buildings and Grounds Committee recommended the use of Hawthorne School by the Sigma Gamma Rho Sorority on March 11, 2000.**

Superintendent Anderson recommended approval of the above requests from the Buildings and Grounds Committee.

1/18/2000

MR. LEWIS made the motion and MR. EL-AMIN seconded the motion to concur with the recommendation of Superintendent Anderson. The motion carried as follows:

AYES: GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY, WILLIAMS
ABSENT: MORRIS

Superintendent Anderson read a letter from the City of Fairview Heights, Illinois requesting the boarding up of Bluffview School. Dr. Anderson recommended that bids are sent out for the boarding up of Bluffview School.

MR. LEWIS made the motion and MS. NEELY seconded the motion to concur with the recommendation of Superintendent Anderson. The motion carried as follows:

AYES: GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY, WILLIAMS
ABSENT: MORRIS

FINANCE COMMITTEE MEETING – LONZO GREENWOOD

President Greenwood requested the contract for Food Service is removed from the Finance Committee Package and the Food Service bid is sent out for bid.

Superintendent Anderson recommended approval of the above items from the Finance Committee.

MS. NEELY made the motion and MRS. GOLLIDAY seconded the motion to concur with the recommendation of Superintendent Anderson. The motion carried as follows:

AYES: GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY, WILLIAMS
ABSENT: MORRIS

PRESIDENT GREENWOOD requested approval of the following items from the Finance Committee:

- The Addendum for December 31, 1999 – total amount \$33,543.42.
- Reimbursement of grant monies to the State (attached)
- E-Rate Grant/Funds

1/18/2000

- Settlement for Vernell Glasper in the amount of \$12,000.
- Project fees or Kennedy Associates: Toolbox - \$4,500; HVC Upgrades - \$177,339; Window replacement and exterior upgrades - \$330,473.
- Non-payment of requisitions for State Substance Abuse & Violence Prevention Grant and refer to Personnel Committee.

Superintendent Anderson recommended approval of the above items from the Finance Committee.

MS. NEELY made the motion and MRS. GOLLIDAY seconded the motion to concur with the recommendation of Superintendent Anderson. The motion carried as follows:

AYES: GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY,
WILLIAMS
ABSENT: MORRIS

REPORT OF THE SUPERINTENDENT – DR. NATHANIEL ANDERSON

EXPULSION: Superintendent Anderson recommended a two-year expulsion of a student attending Morrison School. The District will provide some type of education for the student.

MR. LEWIS made the motion and MS. NEELY seconded the motion to concur with the recommendation of Superintendent Anderson. The motion carried as follows:

AYES: GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY,
WILLIAMS
ABSENT: MORRIS

PERSONNEL SECTION: Superintendent Anderson recommended approval of the Personnel Section, pages 1 – 3.

MR. LEWIS made the motion and MRS. GOLLIDAY seconded the motion to concur with the recommendation of Superintendent Anderson. The motion carried as follows:

AYES: GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY
NAY: WILLIAMS
ABSENT: MORRIS

**FINANCE
SECTIONS A - I:**

Superintendent Anderson recommended approval of Finance Sections A - I.

MR. LEWIS made the motion and MR. EL-AMIN seconded the motion to concur with the recommendation of Superintendent Anderson. The motion carried as follows:

AYES: GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY, WILLIAMS
ABSENT: MORRIS

Superintendent Anderson stated the District was in the process of advertising for the Internal Audit Firm. The advertisement would go before the Financial Oversight Panel.

REPORT OF THE LEGAL DEPARTMENT - ATTORNEY PEARSON BUSH

Attorney Bush stated he had two settlement claims he wanted to present to the Board for approval: One settlement in the amount of \$4,500 and the other in the amount of \$50,000.

Superintendent Anderson recommended approval of the two cases from Attorney Bush.

MS. NEELY made the motion and MRS. GOLLIDAY seconded the motion to concur with the recommendation of Superintendent Anderson. The motion carried as follows:

AYES: GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, NEELY, WILLIAMS
ABSENT: MORRIS

Ms. Neely asked if there were anymore claims pending.

- Attorney Steve Wigginton is in the process of getting them resolved.

ANNOUNCEMENTS:

- Funeral services for Mrs. Lila B. Teer would be held on January 22, 2000
- Dr. Anderson asked those present if they know of those that had died and had contributed to School District 189, to inform the Superintendent's Office so we could recognize their contributions.

- A blood drive will be held at City Hall on next week between 2 and 4 p.m.
- District 189 Scholar Quiz would be held in the Boardroom of the Administration Building on Thursday, January 20, 2000, beginning at 8:30 a.m.

Superintendent Anderson acknowledged the presence of one of our State Representative, The Honorable Wyvetta Young, who was in the audience.

- Representative Young stated a written record should come from the State of what is need in improvements in the School District.
- Representative Young stated we need to ask the governor to declare an economic emergency in the City of East St. Louis —a program to assist with education. She stated she would like this to be a part of an agreement with the State.

**INCORPORATE
REP YOUNG'S REPORT
w/CABINET MTG.**

MRS. GOLLIDAY made a motion and MR. LEWIS seconded the motion to incorporate Representative Young's report with cabinet meeting with Dr. Cheryl Bradley. The motion carried as follows:

AYES:

**GREENWOOD, EL-AMIN, GOLLIDAY, LEWIS, MORRIS,
WILLIAMS**

ABSENT:

MORRIS

- Superintendent Anderson commended students who performed at St. Paul Baptist Church in the MLKing, Jr. Program. He says he has continued to be impressed with the talents of our students. He also stated our students would perform at the St. Clair County Teachers Institute on March 31 of this year.

ADJOURNMENT:

With no further business, President Greenwood called for a motion to adjourn the meeting.

Motion made by MR. LEWIS and seconded by MS. NEELY and unanimously approved to adjourn at 6:35 p.m.

LONZO GREENWOOD, PRESIDENT

IRMA G. GOLLIDAY, SECRETARY

EXHIBIT I

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)

Applicant's Form Identifier: ESTL-F471-YR3

(Create your own code to identify THIS Form 471)

Form 471 Application #: _____

(To be inserted by Fund Administrator)

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.)	East St. Louis School District #189		
2	Funding Year: July 1, 2000 through June 30, 2001	Entity Number (up to 10 digits):	136412	
4a	Street Address, P.O. Box, or Route Number	1005 State St.		
	City	State	Zip Code	
	East St. Louis	IL	62201-1907	
b	Telephone Number (10 digits + ext.)	(618) 583 - 8200 ext.		
c	Fax Number (10 digits)	(618) 583 - 8372		
d	E-mail Address (50 characters max.)	jdaniels@stclair.k12.il.us		
5	Type of Applicant	<input type="checkbox"/> Individual School (Individual 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 (including library system, library branch, or library consortium applying as a library) <input type="checkbox"/> Consortium (intermediate service agencies, states, state networks, special consortia) <input type="checkbox"/> Check here if any members of this consortium are ineligible non-governmental entities.		
6a	Contact Person's Name	James Daniels		
	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	<input type="checkbox"/> Street Address, P.O. Box, or Route Number			
	City	State	Zip Code	
c	<input checked="" type="checkbox"/> Telephone Number (10 digits + ext.)	(618) 583 - 8303 ext.		
d	<input type="checkbox"/> Fax Number (10 digits)	() -		
e	<input checked="" type="checkbox"/> E-mail Address (50 characters max.)	jdaniels@stclair.k12.il.us		
f	Holiday/vacation contact information (optional):			

Block 2: Minor Modification to Existing Contract?

7 Check ONLY if this Form 471 represents a minor modification, such as a modification of services, to a contract included in 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 136412 Applicant's Form Identifier ESTL-F471-YR3
 Contact Person James Daniels Phone Number 618/583-8983

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?	0	0
b	High-bandwidth voice/data/video service: How many buildings served before and after your order?	0	27
c	High-bandwidth voice/data/video service: Highest speed to a building before and after your order?	0	1.544 Mb
d	Dial-up Internet connections: How many before and after your order?	52	20
e	Dial-up Internet connections: Highest speed before and after your order?	56k	56k
f	Direct connections to the Internet: How many before and after your order?	3	27
g	Direct connections to the Internet: Highest speed before and after your order?	56k	1.544 Mb
h	Internet access (for schools): How many rooms have Internet access before and after your order?	35	836
i	Internet access (for libraries): How many buildings have Internet access before and after your order?	0	0
j	Internet access: How many computers (or other devices) with Internet access before and after your order?	35	1600
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 applicant you are, the number of sites you represent, and how services will be provided to those sites. Each worksheet has instructions.

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

Entity Number 136412 Applicant's Form Identifier ESTL-F471-YR3
 Contact Person James Daniels Phone Number 618/583-8200

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

Worksheet #A-1

Page 1
of 3

Instructions: Individual Schools/School Districts use this worksheet to calculate the discount rate for site-specific services and/or to determine the weighted average discount calculations for shared services.

10a Check only one:

- Applying 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): Please 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).

1 Name of 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)
Alta-Sita		U	288	200	69.00%	80%	230.4
Alternative High School		U	142	100	70.04%	80%	113.6
Attucks Elem		U	202	180	89.01%	90%	181.8
Brown Elem.		U	206	206	100.00%	90%	185.4
Detention Home		U	38	38	100.00%	90%	34.2
Dunbar		U	429	400	93.24%	90%	386.1
Edgemont		U	277	268	96.75%	90%	249.3
Harding		U	346	335	96.82%	90%	311.4
Hawthorne		U	705	650	92.19%	90%	634.5
District Totals for calculating Weighted Average Discount			2633				2327

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



Entity Number 136412
 Contact Person James Daniels

Applicant's Form Identifier ESTL-F471-YR3
 Phone Number 618/583-8200

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

Worksheet #A-1
Page 2
 of 3

Instructions: Individual Schools/School Districts use this worksheet to calculate the discount rate for site-specific services and/or to determine the weighted average discount calculations for shared services.

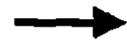
10a Check only one:

- Applying **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)**: Please 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).

1 Name of 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)
Early Childhood		U	188	145	77.13%	90%	169.2
Jackson		U	370	300	81.08%	90%	333
Billy Jones		U	198	198	100.00%	90%	178.2
Lilly Freeman		U	387	377	97.42%	90%	348.3
Lucas		U	194	194	100.00%	90%	174.6
Mandela		U	366	310	84.70%	90%	329.4
Manners		U	383	383	100.00%	90%	344.7
Morrison		U	356	350	98.31%	90%	320.4
McHenry		U	388	350	90.21%	90%	349.2
District Totals for calculating Weighted Average Discount			2830				2547

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



Entity Number 136412 Applicant's Form Identifier ESTL-F471-YR3
 Contact Person James Daniels Phone Number 618/583-8200

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

Worksheet #A-1

Page 3
of 3

Instructions: Individual Schools/School Districts use this worksheet to calculate the discount rate for site-specific services and/or to determine the weighted average discount calculations for shared services.

10a Check only one:

- Applying 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): Please 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).

1 Name of 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)
Neely		U	153	145	94.77%	90%	137.7
Park Annex		U	185	130	70.27%	90%	166.5
Robinson		U	238	238	100.00%	90%	214.2
Wilson		U	295	295	100.00%	90%	265.5
Clark Middle		U	726	683	94.08%	90%	653.4
Lansdowne Middle		U	646	600	92.88%	90%	581.4
Lincoln Middle		U	849	800	94.23%	90%	764.1
E.St.Louis Sr. High		U	2268	1376	60.67%	90%	2041.2
Miles Davis		U	539	292	54.17%	90%	485.1
District Totals for calculating Weighted Average Discount			11,362				10,183

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



90% (89.62%)

Block 5: Discount Funding Request(s)

Block 5, page 1 of 6

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 titled service, "MTN" if month-to-month services as described in instructions) ESTL-ERATE-AADS-2
12 Form 470 Application Number (15 digits) 740370000275234	16 Billing Account Number (e.g., billed telephone number) 618/583-8200
13 SPIN - Service Provider Identification Number (9 digits) 143005375	17 Allowable Contract Date (mm/dd/yyyy, based on Form 470 filing) 1/12/00
14 Service Provider Name Ameritech Advanced Data	18 Contract Award Date (mm/dd/yyyy) 01/13/00
	19 Service Start Date (mm/dd/yyyy) 07/01/00
	20 Contract Expiration Date (mm/dd/yyyy) 01/12/05

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-ESTL-F471-YR3

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, A-2, A-3

Recurring Charges				One-Time 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 (D x C)	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 (J x I)
\$ 10,828.56	0	10828.56	12	\$ 129,994.72			0	\$ 129,994.72	90%	\$ 116,995.25

Entity Number 136412

Applicant's Form Identifier ESTL-F471-YR3

Contact Person JAMES DANIELS

Phone Number 618/583-8303

Block 5: Discount Funding Request(s)Block 5, page 2 of 6

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 type="radio"/> Internet Access <input checked="" type="radio"/> Internal Connections				15 Contract Number (if available, use "T" if tariffed services, "MTM" if month-to-month services as described in instructions) ESTL-ERATE-AADS-1						
12 Form 470 Application Number (15 digits) 740370000275234				16 Billing Account Number (e.g., billed telephone number) 618/583-8200						
13 SPIN - Service Provider Identification Number (9 digits) 143005375				17 Allowable Contract Date (mm/dd/yyyy, based on Form 470 filing) 1/12/00						
14 Service Provider Name Ameritech Advanced Data				18 Contract Award Date (mm/dd/yyyy) 01/13/00						
				19 Service Start Date (mm/dd/yyyy) 07/01/00						
20 Contract Expiration Date (mm/dd/yyyy) 06/30/01										
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-ESTL-F471-YR3								
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): <u> A-1, A-2, A-3 </u>								
23 Calculations										
Recurring Charges			One-Time 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 (D x C)	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 (J x I)
0.00	0	0	0	0.00	5,142,650.18	0	5,142,650.18	5,142,650.18	90%	\$ 4,628,385.16

Entity Number 136412

Applicant's Form Identifier ESTL-F471-YR3

Contact Person JAMES DANIELS

Phone Number 618/583-8303

Block 5: Discount Funding Request(s)

Block 5, page 3 of 6

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)

<p>11 Category of Service (only ONE category should be checked)</p> <p><input checked="" type="radio"/> Telecommunications Service <input type="radio"/> Internet Access <input type="radio"/> Internal Connectors</p>	<p>15 Contract Number (if available; use "T" if billed services, "MTM" if month-to-month services as described in instructions) T</p>																																												
<p>12 Form 470 Application Number (15 digits) 740370000275234</p>	<p>16 Billing Account Number (e.g., billed telephone number) 618/583-8200</p>																																												
<p>13 SPIN - Service Provider Identification Number (9 digits) 143005375</p>	<p>17 Allowable Contract Date (mm/dd/yyyy, based on Form 470 filing) 1/12/00</p>																																												
<p>14 Service Provider Name Ameritech Advanced Data</p>	<p>18 Contract Award Date (mm/dd/yyyy) T</p> <p>19 Service Start Date (mm/dd/yyyy) 07/01/00</p>																																												
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<p>23 Calculations</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="4">Recurring Charges</th> <th colspan="3">One-Time Charges</th> <th colspan="4">Total Charges</th> </tr> <tr> <th>A</th> <th>B</th> <th>C</th> <th>D</th> <th>E</th> <th>F</th> <th>G</th> <th>H</th> <th>I</th> <th>J</th> <th>K</th> </tr> </thead> <tbody> <tr> <td>Monthly \$ charges (total amount per month for service)</td> <td>How much of the \$ amount in (A) is ineligible?</td> <td>Eligible monthly pre-discount amount (A minus B)</td> <td># of months service provided in program year</td> <td>Annual pre-discount \$ amount for eligible recurring charges (D x C)</td> <td>Annual non-recurring (one-time) \$ charges</td> <td>How much of the \$ amount in (F) is ineligible?</td> <td>Annual eligible pre-discount \$ amount for one-time charges (F minus G)</td> <td>Total program year pre-discount \$ amount (E + H)</td> <td>% discount (from Block 4 Worksheet)</td> <td>Funding Commitment \$ Request (J x I)</td> </tr> <tr> <td style="text-align:right">\$ 18,970.00</td> <td style="text-align:center">0</td> <td style="text-align:right">\$ 18,970.00</td> <td style="text-align:center">12</td> <td style="text-align:right">\$ 227,640.00</td> <td style="text-align:right">0.00</td> <td style="text-align:center">0</td> <td style="text-align:right">0.00</td> <td style="text-align:right">\$ 227,640.00</td> <td style="text-align:center">90%</td> <td style="text-align:right">\$ 204,876.00</td> </tr> </tbody> </table>		Recurring Charges				One-Time 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 (D x C)	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 (J x I)	\$ 18,970.00	0	\$ 18,970.00	12	\$ 227,640.00	0.00	0	0.00	\$ 227,640.00	90%	\$ 204,876.00
Recurring Charges				One-Time Charges			Total Charges																																						
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\$ 18,970.00	0	\$ 18,970.00	12	\$ 227,640.00	0.00	0	0.00	\$ 227,640.00	90%	\$ 204,876.00																																			

Entity Number 136412

Applicant's Form Identifier ESTL-F471-YR3

Contact Person JAMES DANIELS

Phone Number 618/583-8303

Block 5: Discount Funding Request(s)

Block 5, page 4 of 6

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						
12 Form 470 Application Number (15 digits) 740370000275234				16 Billing Account Number (e.g., billed telephone number) 618/583-8200						
13 SPIN - Service Provider Identification Number (9 digits) 143001197				17 Allowable Contract Date (mm/dd/yyyy, based on Form 470 filing) 1/12/00						
14 Service Provider Name MCI/World Comm				18 Contract Award Date (mm/dd/yyyy) 01/13/00						
				19 Service Start Date (mm/dd/yyyy) 07/01/00						
				20 Contract Expiration Date (mm/dd/yyyy) MTM						
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-ESTL-F471-YR3								
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, A-2, A-3								
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Recurring Charges					One-Time 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 (D x C)	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 (J x I)
\$ 2,190.15	0	\$2,190.15	12	\$ 26,281.80	0.00	0	0.00	\$ 26,281.80	90%	\$ 23,653.62

Entity Number 136412

Applicant's Form Identifier ESTL-F471-YR3

Contact Person JAMES DANIELS

Phone Number 618/583-8303

Block 5: Discount Funding Request(s)

Block 5, page 5 of 6

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

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12	Form 470 Application Number (15 digits) 740370000275234	16	Billing Account Number (e.g., billed telephone number)							
13	SPIN - Service Provider Identification Number (9 digits) 143005544	17	Allowable Contract Date (mm/dd/yyyy, based on Form 470 filing)	1/12/00						
14	Service Provider Name Sonacom Inc.	18	Contract Award Date (mm/dd/yyyy)	01/13/00						
		19	Service Start Date (mm/dd/yyyy)	07/01/00						
		20	Contract Expiration Date (mm/dd/yyyy)	06/30/01						
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-ESTL-F471-YR3									
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\$ -	0	\$0.00	0	\$ -	\$ 2,057,236.00	0	\$ 2,057,236.00	\$ 2,057,236.00	90%	\$ 1,851,512.40

Entity Number 136412

Applicant's Form Identifier ESTL-F471-YR3

Contact Person JAMES DANIELS

Phone Number 618/583-8303

Block 5: Discount Funding Request(s)

Block 5, page 6 of 6

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

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12 Form 470 Application Number (15 digits) 740370000275234				16 Billing Account Number (e.g., billed telephone number)						
13 SPIN - Service Provider Identification Number (9 digits) 143005544				17 Allowable Contract Date (mm/dd/yyyy, based on Form 470 filing)		1/12/00				
14 Service Provider Name Sonacom Inc.				18 Contract Award Date (mm/dd/yyyy)		01/13/00				
				19 Service Start Date (mm/dd/yyyy)		07/01/00				
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\$ -	0	\$0.00	0	\$ -	\$ 511,250.88	0	\$ 511,250.88	\$ 511,250.88	90%	\$ 460,125.79

Block 6: Certifications and Signature

- 24 The applicant is eligible for support because it includes: (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 schools and libraries I represent 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 individual schools, libraries, and library consortia listed in Block 4 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.
 - b technology plan(s) will be approved by a state or other authorized body.
 - 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 and will retain for five years any and all worksheets and other records that I rely upon to fill out this application.
- 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 	35 Date 1/13/2000
36 Printed name of authorized person Nathaniel Anderson, Ed.D.	
37 Title or position of authorized person Superintendent	
38 Telephone number of authorized person: (618) 583-8215, 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.	

Entity Number 138412 Applicant's Form Identifier ESTL-F471-YR3
Contact Person James Daniels Phone Number 618/583-8301

NOTICE TO INDIVIDUALS: Section 54.504 of the Federal Communications Commission's rules requires all schools and libraries ordering ser

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 val 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 w

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/ 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 Redt 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 instruct

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

**SLD-Form 471
c/o Ms. Smith
3833 Greenway Drive
Lawrence Kansas 66046
(888) 203-8100**

ATTACHMENT A - E.ST.LOUIS DISTRICT #189

ENTITY NUMBER: 136412

CONTACT NAME: JAMES DANIELS 618/583-8303

470 APPLICATION NUMBER: 740370000275234

DISTRICT-WIDE DISCOUNT: 90% ON ALL SERVICES

Telecommunications Services

Vendor: Ameritech Advanced Data Services

Spin#: 143005375

Contract#: ESTL-ERATE-AADS-2

Item	Location	Service Description	Cost/Mo.	% Elig.	Elig./Mo.	Mo.	Total Eligible	
	District Offices	DS-3 Service	3,267.60	100	3,267.60	12	\$39,211.20	\$39,211.20
	District Offices	T-1 Service	250.00	100		12	\$3,000.00	
	Alta Sita	T-1 Service	250.00	100		12	\$3,000.00	
	Attucks	T-1 Service	250.00	100		12	\$3,000.00	
	Brown	T-1 Service	473.72	100		12	\$5,684.64	
	Davis	T-1 Service	250.00	100		12	\$3,000.00	
	Dunbar	T-1 Service	250.00	100		12	\$3,000.00	
	Edgemont	T-1 Service	529.08	100		12	\$6,348.96	
	Harding	T-1 Service	529.08	100		12	\$6,348.96	
	Hawthorne	T-1 Service	250.00	100		12	\$3,000.00	
	Jackson	T-1 Service	250.00	100		12	\$3,000.00	
	Jones	T-1 Service	250.00	100		12	\$3,000.00	
	Lilly-Freeman	T-1 Service	250.00	100		12	\$3,000.00	
	Lucas	T-1 Service	250.00	100		12	\$3,000.00	
	Mandela	T-1 Service	250.00	100		12	\$3,000.00	
	Manners	T-1 Service	250.00	100		12	\$3,000.00	
	Morrison	T-1 Service	529.08	100		12	\$6,348.96	
	McHenry	T-1 Service	250.00	100		12	\$3,000.00	
	Neely	T-1 Service	250.00	100		12	\$3,000.00	
	Park Annex	T-1 Service	250.00	100		12	\$3,000.00	
	Robinson	T-1 Service	250.00	100		12	\$3,000.00	
	Wilson	T-1 Service	250.00	100		12	\$3,000.00	

Clark Jr. High	T-1 Service	250.00	100	12	\$3,000.00
Landowne Jr. Hig	T-1 Service	250.00	100	12	\$3,000.00
Lincoln Jr. High	T-1 Service	250.00	100	12	\$3,000.00
E.St. Louis Sr. Hiq	T-1 Service	250.00	100	12	\$3,000.00
Early Childhood C	T-1 Service	250.00	100	12	\$3,000.00

TOTAL ELIGI \$129,942.72 129,942.72

Telecommunications Services

Vendor: MCI / WORLD COMM TELECOMMUNICATIONS CO.
 Spin#: 143001197
 Contract#: Month to Month

Item	Location	Service Descripti	Cost/Mo.	% Elig.	Elig./Mo.	Mo.	Total Eligible	
	District-Wide	Long Distance	2,190.15	100	2,190.15	12	\$26,281.80	26,281.80

Telecommunications Services

Vendor: Ameritech
 Spin#: 143005375
 Contract#: Tariff

Item	Location	Service Descripti	Cost/Mo.	% Elig.	Elig./Mo.	Mo.	Total Eligible	
	District-Wide	Local Service	18,970.00	100	18,970.00	12	\$227,640.00	227,640.00

Item	Service Descriptio	Quantity	List Price Per	Total List	Discount	Total Price	Total
CISCO7206VXR/300	Routers	2	\$17,000.00	\$34,000.00	41%	\$10,030.00	\$20,060.00
ACS-2500ASYN	Cables	4	\$100.00	\$400.00	41%	\$59.00	\$236.00
C7200-I/O-FE-BUN	RouterPlugins	2	\$0.00	\$0.00	41%	\$0.00	\$0.00
CAB-AC	Cables	2	\$0.00	\$0.00	41%	\$0.00	\$0.00
CAB-OCT-V35-MT	Cables	2	\$750.00	\$1,500.00	41%	\$442.50	\$885.00
MEM-I/O-D-FLC16M	Memory	2	\$0.00	\$0.00	41%	\$0.00	\$0.00
MEM-SD-NPE-256MB	Memory	2	\$4,200.00	\$8,400.00	41%	\$2,478.00	\$4,956.00
NPE-300-BUN	RouterPlugins	2	\$0.00	\$0.00	41%	\$0.00	\$0.00
PA-8T-V35	Router Piggyback	2	\$8,000.00	\$16,000.00	41%	\$4,720.00	\$9,440.00
PA-MC-T3	Router Piggyback	2	\$22,000.00	\$44,000.00	41%	\$12,980.00	\$25,960.00
PWR-7200	PowerSupplies	2	\$0.00	\$0.00	41%	\$0.00	\$0.00
S72C-12.0.3T	CommDev-S\W	2	\$0.00	\$0.00	41%	\$0.00	\$0.00