



1459 Main Street
PO Box 147
Guffey, Colorado 80820
Phone: (719) 689-2093
Fax (719) 689-3407

www.guffeyschool.org

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, SW
Washington, DC 20554
or
9300 East Hampton Drive
Capitol Heights, MD 20743
or
c/o Natek
236 Massachusetts Avenue, NE, Suite 110
Washington, DC 20002

August 27th, 2014

Regarding: eRate Out-of-Window Request for Waiver, CC Docket No. 02-6
BEN 94343 – Guffey Community Charter School
Funding Year 2014-2015, Form 470 (#687640001237147) and Form 471 (#994649)

From: Kim McAlear, School Bookkeeper

To Whom It May Concern:

The Guffey Community Charter School is a free public school located in Park County, Colorado. Our small, rural school serves children between Kindergarten and 8th grade from two counties, though primarily from the Guffey area.

The Guffey School and the surrounding area essentially have no cell phone service nor (before our project) high speed internet service. In 2013 – this lack of communication and technology earned the Town of Guffey the label of most underserved area in Park County. This has a profound effect on education for area children since the Guffey Community Charter School previously had no broadband internet connectivity and was unable to utilize the many educational resources and state imposed standardized testing that require high speed internet.

When we began exploring our options, we learned that, due to our rural location, the only opportunity would be to partner with a company that could host a wireless distribution pole on the property behind our school. We would then be able to use unlimited high speed internet without metered or throttled bandwidth – like we experienced with satellite. Thanks to several grants and local community support, the Guffey School was able to purchase the piece of land behind our school on March 28, 2014!

For years we have paid for the satellite internet service in full, as both of our previous providers were not eRate Service Providers. The cost difference between the previous satellite internet and the wireless broadband is significant. Due



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to the timing of the purchase of the land, we were unable to file the 470 for 2014-2015 Funding Year prior to the cutoff date of 2/26/14. We could not file because we did not yet own the land – or know if we would be able to go forward with the project. We were also unable to file the 471 by the cutoff date, due to the same situation. We filed both forms as soon as we possibly could, considering the circumstances. The hardship of the full priced service will be significant for our small, three classroom school. We are therefore making this Request for Waiver on our Out-of-Window filing date of the 470 and 471.

I am including all 470 and 471 paperwork regarding our internet service. Our telephone 470 information will also be visible – but it is NOT part of this Request for Waiver.

Please feel free to contact me with any further questions or if you should need further clarification of anything included here.

Thank You,

Kim McAlear
Guffey Community Charter School
Administrative Assistant
PO Box 147
1459 Main Street
Guffey, CO 80820

Direct Phone: (719) 689-5996

School Phone: (719) 689-2093

School Fax: (719) 689-3407

Encl: USAC/FCC Forms 470 and 471 and supporting documents for Guffey Community Charter School for Funding Year 2014-2015

FCC Form 470

Approval by OMB
3060-0806

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

Estimated Average Burden Hours per Response: 3 hours

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

Please read instructions before beginning this form. (You can also file online at www.usac.org/sl)

Form 470 Application Number: 687640001237147	Applicant's Form Identifier: FY2014 - SPT470
Application Status: COMPLETE	Posting Date: 04/25/2014
Allowable Contract Date: 05/23/2014	Certification Received Date:

Block 1: Applicant Address and Information

1 Name of Applicant:

GUFFEY COMMUNITY CHARTER SCHOOL

2 Funding Year: 2014 (Funding years run from July 1 through the following June 30)

3 Entity Number: 94343

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

1459 MAIN ST

City: GUFFEY State: CO Zip Code: 80820 -9505

4b Telephone Number: (719) 689 -2093

4c Fax Number: (719) 689 -3407

5a Eligible Entities That Will Receive Services:

Check the ONE choice in **5a** that best describes the eligible entities that will receive the services described in this form. You will then list in Item **15** the entity/entities that will pay the bills for these services.

- Individual School (individual public or non-public school)
- School District (LEA; public or non-public [e.g., diocesan] local district representing multiple schools)
- Library (including library system, library outlet/branch or library consortium as defined under LSTA)
- Consortium (intermediate service agencies, states, state networks, consortia of schools and/or libraries)
- Statewide application for (enter 2-letter state code)

representing (check all that apply)

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

5b Recipient(s) of Services - Check all that apply:

- Private Public Charter
- Tribal Head Start State Agency

5c Number of eligible entities for which services are sought: 1

Block 1: Applicant Address and Information (continued)

6a Contact Person's Name:

Kim McAlear

If the Contact Person's Street Address is the same as **Item 4a** above, check here. If not, complete Item 6b.

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

NOTE: USAC will use this address to mail correspondence

1459 MAIN ST

City: GUFFEY State: CO Zip Code: 80820 -9505

Check the box next to your preferred mode of contact and provide your contact information. One box **MUST** be checked and an entry provided.

6c Telephone Number: (719) 689 -2093

6d Fax Number: (719) 689 -3407

6e E-Mail Address: kim@mtnsupport.com

Re-enter E-mail Address: kim@mtnsupport.com

If a consultant is assisting you with your application process, please complete Item 7 below:

7 Consultant Name:

Name of Consultant's Employer:

Consultant's Street Address:

City: State: Zip Code:

Consultant's Telephone Number: Ext.

Consultant's Fax Number:

Consultant's E-mail Address:

Re-enter E-mail Address:

Consultant Registration Number:

Entity Number: 94343	Applicant's Form Identifier: FY2014 - SPT470
Contact Person: Kim McAlear	Phone Number: (719) 689-2093
Block 2: Summary Description of Needs or Services Requested	
8 Priority One Services (Telecommunications and/or Internet Access)	
<i>If you check YES to indicate you have a Request for Proposals (RFP) that specifies the services you are seeking, your RFP must be available to all interested bidders for at least 28 days. If your RFP is not available to all interested bidders, or if you check NO and you have or intend to have an RFP, you risk denial of your funding requests.</i>	
<p>a <input checked="" type="checkbox"/> YES, I have released or intend to release an RFP for one or more of these services. It is available or will become available on the Internet at:</p> <p>or via (check one) <input checked="" type="checkbox"/> the contact person in Item 6 or <input type="checkbox"/> the contact person listed in Item 12</p> <p>Your RFP Identifier:</p>	
<p>b <input type="checkbox"/> NO, I have not released and do not intend to release an RFP for any of these services.</p> <p>Whether you check YES or NO, you must list below the Priority One Services you seek. Specify each service or function (e.g., voice service, monthly Internet access service, etc) and quantity and/or capacity (e.g., for voice service, 20 existing lines plus 10 new ones, or for monthly Internet access service, for 500 users).</p>	

Service	Quantity and/or Capacity
monthly internet service	for 35 users

9 [Reserved]	
Entity Number: 94343	Applicant's Form Identifier: FY2014 - SPT470
Contact Person: Kim McAlear	Phone Number: (719) 689-2093
10 Internal Connections Other Than Basic Maintenance	
<i>If you check YES to indicate you have a Request for Proposals (RFP) that specifies the services you are seeking, your RFP must be available to all interested bidders for at least 28 days. If your RFP is not available to all interested bidders, or if you check NO and you have or intend to have an RFP, you risk denial of your funding requests.</i>	
<p>a <input type="checkbox"/> YES, I have released or intend to release an RFP for one or more of these services. It is available or will become available on the Internet at:</p> <p>or via (check one) <input type="checkbox"/> the contact person in Item 6 or <input type="checkbox"/> the contact person listed in Item 12</p> <p>Your RFP Identifier:</p>	
<p>b <input type="checkbox"/> NO, I have not released and do not intend to release an RFP for any of these services.</p> <p>Whether you check YES or NO, you must list below the Internal Connections services you seek. Specify each service (e.g., a router, hub and cabling) and quantity and/or capacity (e.g., connecting 1 classroom of 30 students).</p>	

11 Basic Maintenance of Internal Connections	
<i>If you check YES to indicate you have a Request for Proposals (RFP) that specifies the services you are seeking, your RFP must be available to all interested bidders for at least 28 days. If your RFP is not available to all interested bidders, or if you check NO and you have or intend to have an RFP, you risk denial of your funding requests.</i>	
<p>a <input type="checkbox"/> YES, I have released or intend to release an RFP for one or more of these services. It is available or will become available on the Internet at:</p> <p>or via (check one) <input type="checkbox"/> the contact person in Item 6 or <input type="checkbox"/> the contact person listed in Item 12</p> <p>Your RFP Identifier:</p>	
<p>b <input type="checkbox"/> NO, I have not released and do not intend to release an RFP for any of these services.</p> <p>Whether you check YES or NO, you must list below the Basic Maintenance services you seek. Specify each service (e.g., basic maintenance of routers) and quantity and/or capacity (e.g., for 10 routers).</p>	

Entity Number: 94343	Applicant's Form Identifier: FY2014 - SPT470
Contact Person: Kim McAlear	Phone Number: (719) 689-2093
12 (Optional) Please name the person on your staff or project who can provide additional technical details or answer specific questions from service providers about the services you are seeking. This person does not need to be the contact person(s) listed in Item 6 nor the Authorized Person who signs this form.	
<p>Name: Kim McAlear</p> <p>Title: Bookkeeper</p> <p>Telephone Number: (719) 689 - 5996</p> <p>Fax Number: (719) 689 - 3407</p> <p>Email Address: kim@mtnsupport.com</p> <p>Re-enter E-mail Address: kim@mtnsupport.com</p>	
<p>13 <input type="checkbox"/> Check this box if there are any restrictions imposed by state or local laws or regulations on how or when service providers may contact you or on other bidding procedures. Please describe below any such restrictions or procedures and/or provide an Internet address where they are posted and a contact name and telephone number.</p> <p><input checked="" type="checkbox"/> Check this box if no state and local procurement/competitive bidding requirements apply to the procurement of services sought on this Form 470.</p> <p>If you are requesting services for a funding year for which a Form 470 cannot yet be filed online, include that information here.</p>	

Block 3:
14. [Reserved]

Entity Number: 94343	Applicant's Form Identifier: FY2014 - SPT470				
Contact Person: Kim McAlear	Contact Phone Number: (719) 689-2093				
Block 4: Recipients of Service					
<p>15 Billed Entities</p> <p>List the entity/entities that will be paying the bills directly to the provider for the services requested in this form. These are known as Billed Entities. At least one line of this item must be completed. If a Billed Entity cited on your Form 471 is not listed below, funding may be denied for the funding requests associated with this Form 470. Attach additional pages if needed.</p> <table> <thead> <tr> <th>Entity Number</th> <th>Entity Name</th> </tr> </thead> <tbody> <tr> <td>94343</td> <td>GUFFEY COMMUNITY CHARTER SCHOOL</td> </tr> </tbody> </table>		Entity Number	Entity Name	94343	GUFFEY COMMUNITY CHARTER SCHOOL
Entity Number	Entity Name				
94343	GUFFEY COMMUNITY CHARTER SCHOOL				

Entity Number: 94343	Applicant's Form Identifier: FY2014 - SPT470
Contact Person: Kim McAlear	Contact Phone Number: (719) 689-2093
Block 5: Certifications and Signature	
<p>16 I certify that the applicant includes: (Check one or both.)</p> <p>a <input checked="" type="checkbox"/> schools under the statutory definitions of elementary and secondary schools found in the No Child Left Behind Act of 2001, 20 U.S.C. §§ 7801 (18) and (38), that do not operate as for-profit businesses, and do not have endowments exceeding \$50 million; and/or</p> <p>b <input type="checkbox"/> 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, and universities).</p> <p>17 <input checked="" type="checkbox"/> I certify that, if required by Commission rules, all of the individual schools and libraries receiving services under this form are covered by technology plans that do or will cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body, or an SLD-certified technology plan approver, prior to the commencement of service.</p> <p><input type="checkbox"/> Or I certify that no technology plan is required by Commission rules.</p> <p>18 <input checked="" type="checkbox"/> I certify that I will post my Form 470 and (if applicable) make my RFP available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted will be carefully considered and the bid selected will be for the most cost-effective service or equipment offering, with price being the primary factor, and will be the most cost-effective means of meeting educational needs and technology plan goals.</p> <p>19 <input checked="" type="checkbox"/> I certify that I will retain required documents for a period of at least five years after the last day of service delivered (or whatever retention period is required by the rules in effect at the time of this certification). I certify that I will retain all documents necessary to demonstrate compliance with the statute and Commission rules regarding the form for, receipt of, and delivery of services receiving schools and libraries discounts. I acknowledge that I may be audited pursuant to participation in the schools and libraries program.</p> <p>20 <input checked="" type="checkbox"/> I certify that the services the applicant purchases at discounts provided by 47 U.S.C. § 254 will be used primarily for educational purposes and will not be sold, resold or transferred in consideration for money or any other thing of value, except as permitted by the Commission's rules at 47 C.F.R. §§ 54.500, 54.513. Additionally, I certify that the entity or entities listed on this form have not received anything of value or a promise of anything of value, other than services and equipment sought by means of this form, from the service provider, or any representative or agent thereof or any consultant in connection with this request for services.</p> <p>21 <input checked="" type="checkbox"/> I acknowledge that support under this support mechanism is conditional upon the school(s) and/or library(ies) I represent securing access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support. I certify that I have considered what financial resources should be available to cover these costs.</p> <p>22 <input checked="" type="checkbox"/> I certify that I am authorized to procure eligible services for the eligible entity(ies). I certify that I am authorized to submit this request on behalf of the eligible entity(ies) listed on this form, that I have examined this request, and to the best of my knowledge, information, and belief, all statements of fact contained herein are true.</p> <p>23 <input checked="" type="checkbox"/> I certify that I have reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that I have complied with them. I acknowledge that persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</p> <p>24 <input checked="" type="checkbox"/> I acknowledge that FCC rules provide that persons who have been convicted of criminal violations or held civilly liable for certain acts arising from their participation in the schools and libraries support mechanism are subject to suspension and debarment from the program.</p>	

Entity Number: 94343	Applicant's Form Identifier: FY2014 - SPT470
Contact Person: Kim McAlear	Contact Phone Number: (719) 689-2093
25 Signature of authorized person: <input type="checkbox"/>	26 Date:

27a Printed name of authorized person:
Kim McAlear

27b Title or position of authorized person:
Bookkeeper

Check here if the consultant in Item 7 is the Authorized Person.

27c Street Address, P.O. Box, Route Number, City, State, Zip Code:
1459 Main Street
City: Guffey
State: CO
Zip Code: 80820

27d Telephone Number of Authorized Person:
(719) 689-5996

27e Fax Number of Authorized Person:
(719) 689-3407

27f E-mail Address of Authorized Person:

kim@mtnsupport.com

Re-enter E-mail Address:

kim@mtnsupport.com

27g Name of Authorized Person's Employer:

Guffey Community Charter School

Service provider involvement with preparation or certification of a Form 470 can taint the competitive bidding process and result in the denial of funding requests. For more information, refer to the Schools and Libraries area of the USAC web site at www.usac.org/sl or call the SLD Client Service Bureau at 1-888-203-8100.

Entity Number: 94343**Applicant's Form Identifier: FY2014 - SPT470****Contact Person: Kim McAlear****Phone Number: (719) 689-2093**

NOTICE: In accordance with Section 54.504 of the Federal Communications Commission's rules, certain schools and libraries ordering services that are eligible for and seeking universal service discounts must file this Description of Services Requested and Certification Form (FCC Form 470) with the Universal Service Administrator. 47 C.F.R. § 54.504(b). 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 this report will be used to ensure that schools and libraries comply with the competitive bidding requirement contained in 47 C.F.R. § 54.504. Schools and libraries 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 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 any applicable 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. In addition, information provided in or submitted with this form or in response to subsequent inquiries may also be subject to disclosure consistent with the Communications Act of 1934, FCC regulations, the Freedom of Information Act, 5 U.S.C. § 552, or other applicable law.

If you owe a past due debt to the federal government, the 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 form without action.

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

Public reporting burden for this collection of information is estimated to average 3 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 470
P.O. Box 7026
Lawrence, Kansas 66044-7026
1-888-203-8100**

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

**SLD Forms
ATTN: SLD Form 470
3833 Greenway Drive
Lawrence, Kansas 66046
1-888-203-8100**

FCC Form 470
December 2013

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FCC Form 470

Universal Service Program Description of Services Requested and Certification Form



Approval by OMB
3060-0806

Entity Number: 94343

**Applicant's Form Identifier: FY2014 -
SPT470**

Contact Person: Kim McAlear

Phone Number: (719) 689-2093

470

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

Form 470 Application Number: 687640001237147

16. I certify that the applicant includes: (Check one or both.)

a. schools under the statutory definitions of elementary and secondary schools found in the **No Child Left Behind Act of 2001, 20 U.S.C. §§ 7801 (18) and (38)**, 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, and universities).

17. I certify that, if required by Commission rules, all of the individual schools and libraries receiving services under this form are covered by technology plans that do or will cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body, or an SLD-certified technology plan approver, prior to the commencement of service.

Or I certify that no technology plan is required by Commission rules.

18. I certify that I will post my Form 470 and (if applicable) make my RFP available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted will be carefully considered and the bid selected will be for the most cost-effective service or equipment offering, with price being the primary factor, and will be the most cost-effective means of meeting educational needs and technology plan goals.

19. I certify that I will retain required documents for a period of at least five years after the last day of service delivered (or whatever retention period is required by the rules in effect at the time of this certification). I certify that I will retain all documents necessary to demonstrate compliance with the statute and Commission rules regarding the form for, receipt of, and delivery of services receiving schools and libraries discounts. I acknowledge that I may be audited pursuant to participation in the schools and libraries program.

20. I certify that the services the applicant purchases at discounts provided by 47 U.S.C. § 254 will be used primarily for educational purposes and will not be sold, resold or transferred in consideration for money or any other

thing of value, except as permitted by the Commission's rules at 47 C.F.R. §§ 54.500, 54.513. Additionally, I certify that the entity or entities listed on this form have not received anything of value or a promise of anything of value, other than services and equipment sought by means of this form, from the service provider, or any representative or agent thereof or any consultant in connection with this request for services.

21. I acknowledge that support under this support mechanism is conditional upon the school(s) and/or library(ies) I represent securing access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support. I certify that I have considered what financial resources should be available to cover these costs.

22. I certify that I am authorized to procure eligible services for the eligible entity(ies). I certify that I am authorized to submit this request on behalf of the eligible entity(ies) listed on this form, that I have examined this request, and to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

23. I certify that I have reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that I have complied with them. I acknowledge that persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

24. I acknowledge that FCC rules provide that persons who have been convicted of criminal violations or held civilly liable for certain acts arising from their participation in the schools and libraries support mechanism are subject to suspension and debarment from the program.

25. Signature of authorized person



26. Date

4/25/14

27a. Printed name of authorized person **Kim McAlear**

27b. Title or position of authorized person **Bookkeeper**

Check here if the consultant in Item 7 is the Authorized Person.

27c. Street Address, P.O. Box, Route Number, City, State, Zip Code

1459 Main Street

Guffey, CO 80820

27d. Telephone Number of Authorized Person **(719) 689-5996**

27e. Fax Number of Authorized Person **(719) 689-3407**

27f. E-mail Address of Authorized Person **kim@mtnsupport.com**

27g. Name of Authorized Person's Employer **Guffey Community Charter School**

Form 470 Application Number: 687640001237147

GUFFEY COMMUNITY CHARTER SCHOOL

1459 MAIN ST

GUFFEY, CO 80820-9505

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

The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or a potential violation of any applicable 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. In addition, information provided in or submitted with this form or in response to subsequent inquiries may also be subject to disclosure consistent with the Communications Act of 1934, FCC regulations, the Freedom of Information Act, 5 U.S.C. § 552, or other applicable law.

If you owe a past due debt to the federal government, the 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.

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Please submit this form to:

**SLD-Form 470
P.O. Box 7026
Lawrence, Kansas 66044-7026
1-888-203-8100**

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

**SLD Forms
ATTN: SLD Form 470
3833 Greenway Drive
Lawrence, Kansas 66046
1-888-203-8100**

FCC Form 470
December 2013

Done



E-RATE Request for Quote for Internet Service

1459 Main Street
PO Box 147
Guffey, Colorado 80820
Phone: (719) 689-2093
Fax: (719) 689-3407

www.guffeyschool.org

The Guffey Community Charter School is accepting quotes for eligible services as defined by Schools and Libraries Division (SLD) of the Universal Services Administration Company (USAC) -- <http://www.usac.org/sl/>.

The following service is sought:

Internet Service

Detailed information on the service sought is found below. Inquiries should be directed to Kim McAlear, Bookkeeper, at kmcalear@guffeyschool.org or (719) 689-5996. All quotes must be submitted no later than May 22, 2014 and must be delivered either by ground delivery, fax, or by email:

Ground Delivery

Guffey Community Charter School
Attn: Kim McAlear
1459 Main Street
Guffey, CO 80820

FAX

(719) 689-3407

E-Mail

kmcalear@guffeyschool.org

All proposals will be evaluated according to price, suitability, and ability to support load requested.

The Guffey Community Charter School reserves the right to reject any or all proposals. We also reserve the right to check references.

General Facts and Information:

1. Service shall be provided for the school located at 1459 Main Street, Guffey, Colorado 80820.
2. We require at least 5 Mbps Download/1 Mbps Upload speed – but would like 20 Mbps Download/5 Mbps Upload speed, if possible.
3. There shall be no total bandwidth limitations, neither daily, monthly, nor annually.
4. There should be low latency (substantially less than typical satellite latency).
5. Service shall be able to support 35 simultaneous users.
6. Vendor must complete the worksheet on the following page and include with the quote.

GUFFEY COMMUNITY CHARTER SCHOOL INTERNET SERVICE WORKSHEET

Monthly Total for Internet Service _____

One time installation fees _____

Contract Dates _____

(Should match the E-Rate Funding Year of 7/1/14 – 6/30/15 or include multiple Funding Years)

Total Cost for the Term of Contract _____

Company Name _____

Company Address _____

City _____ State _____ Zip Code _____

Company Phone Number _____

Sales Contact _____ Email Address _____

Support Phone Number _____



Universal Service Administrative Company

Schools and Libraries Division



**FORM 470 RECEIPT NOTIFICATION LETTER
(Funding Year 2014: 07/01/2014-06/30/2015)**

May 05, 2014

Kim McAlear
GUFFEY COMMUNITY CHARTER SCHOOL
1459 MAIN ST
GUFFEY, CO 80820-9505

**Re: Form 470 Application Number: 687640001237147
Entity Number: 94343
Applicant's Form Identifier: FY2014 - SPT470
Date Form 470 Posted: 04/25/2014
Allowable Contract Date: 05/23/2014**

This is your notification that the above FCC Form 470, "Description of Services Requested and Certification Form" was successfully posted to the USAC website. This posting begins the required 28-day competitive bidding process.

Attached to this Form 470 Receipt Notification Letter (RNL) is a Report summarizing the information you provided to USAC for the FCC Form 470 referenced above. Also included are advisories to assist you in appropriate use of the FCC Form 470 to establish funding requests on your FCC Form 471.

It is important that you review this Report and your FCC Form 470 using the Search Posted tool from the Apply Online page now to make sure the quantities, products, and services you require have been correctly posted and, if necessary, take any appropriate corrective action as soon as possible. You are allowed to correct certain errors on your form but not others. The Report indicates if a correction to a field is allowed.

- If a correction to a field is allowed, follow the instructions below to submit your correction to USAC.
- If a correction to a field is not allowed, you must post a new FCC Form 470 and wait the required 28 days to correct this.

DO NOT SEND CORRECTIONS TO THE CLIENT SERVICE BUREAU. To make an allowable correction, please do the following:

- If you would like to request a correction to a field that does not appear in the attached Report, print a copy of your FCC Form 470 and clearly note your requested correction.
- Verify that the allowed correction can be made through the RNL correction process. Any non-allowable corrections submitted through the RNL correction process will not be made.
- Make a copy of your Report and indicate on the copy any allowable corrections in the spaces indicated.
- Sign the copy and include your name, title, contact information, and date.
- Submit the copy using the guidance posted on the "Ministerial & Clerical Errors" page on our website to make corrections.
- Corrections may be made until a Funding Commitment Decision Letter that features the above Form 470 Application Number is issued.
- Retain a copy of the RNL and any submitted corrections.
- To determine what corrections are allowable and why review of this Report is important to you, see the "Ministerial & Clerical Errors" page posted in the Reference Area of our website.

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

GENERAL REMINDER

- Use the Form 470 Application Number shown above in any FCC Form 471, Block 5 Funding Request that cites this FCC Form 470. Share this number with those schools and/or libraries who may wish to cite this FCC Form 470 in their FCC Form(s) 471.
- Follow all applicable state and local procurement laws and be prepared to demonstrate compliance with these laws.
- Include appropriate contingencies in contracts for any or all of the requested services in the event of modification or denial of funding.
- See "Guide to USAC Letter Reports" posted in Reference Area of our website for a description of each of the fields featured in the Report.
- Watch our website for information about the FCC Form 471 filing window.
- You can view your entire FCC Form 470 by clicking on the "Search Posted" button in the Apply Online area of the website.
- Use the print feature on your browser to print any portion of your FCC Form 470 or the entire application as posted.

COMPLETE PROGRAM INFORMATION is posted on our website. You may also contact our Client Service Bureau using the "Submit a Question" link on our website, toll-free by fax at 1-888-276-8736 or toll-free by phone at 1-888-203-8100. DO NOT SEND CORRECTIONS TO OUR CLIENT SERVICE BUREAU.

Schools and Libraries Division
Universal Service Administrative Company

**Form 470 687640001237147RNL Report
Funding Year 2014**

THIS REPORT DOES NOT CONTAIN ANY DECISIONS CONCERNING YOUR REQUESTS FOR DISCOUNTS.
USE THIS REPORT TO LIST OR INDICATE CORRECTIONS YOU WISH TO MAKE TO YOUR FCC FORM 470.

Follow the guidance posted on the "Ministerial & Clerical Errors" page on our website to make allowable corrections. All corrections - including corrections to new fields - are subject to review for Program compliance and approval.

Allowable Contract Date: 05/23/2014

This is the earliest date to execute contracts for contracted services, select your service provider(s) (including tariff/month-to-month service providers), and sign and submit your FCC Form 471 based on this FCC Form 470. Any funding request with earlier dates for these actions that cite this FCC Form 470 as the establishing FCC Form 470 will result in denial.

- NOTE: If you issue an RFP after you post your FCC Form 470, you must wait the required 28 days starting with the day that the RFP becomes publicly available to all bidders.

Corrections Below Submitted by:

Signature: _____ Date: _____

Printed Name: _____

Title: _____

Email, Fax Number or Phone Number: _____

Item #	Data Entered on FCC Form 470	Make Corrections Here
1. Name of applicant	GUFFEY COMMUNITY CHARTER SCHOOL	
3. Entity Number	94343	
5b. Recipients of Service		
5c. Number of Eligible Entities	1	
6a. Contact Person's Name	Kim McAlear	
6c. Contact Telephone	719-689-2093	
6d. Contact Fax	719-689-3407	
6e. Contact Email	kim@mtnsupport.com	
7. Consultant Name		
Consultant Number		
Consultant Employer		
8. Priority One Services	Posted - RFP available	Corrections not allowed
10. Internal Connections Other than Basic Maintenance	Not Posted	Corrections not allowed
11. Basic Maintenance of Internal Connections	Not Posted	Corrections not allowed

- You cannot seek discounts for products or services in a Category of Service on the FCC Form 471 if those services in those categories were not indicated on a FCC Form 470. You must post a new FCC Form 470 indicating all categories where services may be requested and wait the required 28 days to correct this.
- If you indicated in this FCC Form 470 that an RFP is available for a service but one is not, your funding request will be denied. You must post a new FCC Form 470 indicating that an RFP is not available and wait the required 28 days to correct this.



USAC

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



TIME SENSITIVE MATERIAL

00006
Kim McAlear
GUFFEY COMMUNITY CHARTER SCHOOL
1459 MAIN ST
GUFFEY, CO 80820-9505

CANCEL

**Schools and Libraries Service Program
Services Ordered and Certification Form 471
Application Status Display**

**Billed Entity Number: Funding Year: 2014
94343**

For an explanation of your Application Status, please scroll down to the Explanation table below.

Form 471 Application Number	Applicant Form Identifier	Application Status
994649	FY2014 - SPT471	Certified - Out of Window
988816	FY2014-471	FCDL Issued - 07/02/2014

Application Status	Explanation
Canceled	Your Form 471 has been canceled. No further action will be taken on this form.
Incomplete	Block 1 of your Form 471 has been successfully data entered. However, no further action will be taken on this form until it is completed and certified (whether online or on paper) and moves to Certified - In Window status.
Complete	THIS STATUS IS FOR ONLINE FILERS ONLY: You have clicked the "Submit" button to file your Form 471, but the Block 6 certification process (whether online or on paper) has not been completed.
Certified - In Window	Your Form 471 was successfully certified within the filing window for the Funding Year and is awaiting assignment for Initial Review.
Certified - Out of Window	Your Form 471 was certified outside of the filing window for the Funding Year.
Initial Review	Your Form 471 has been assigned for Initial Review and is being reviewed by Program Integrity Assurance (PIA) for compliance with program rules. All applications must receive both an Initial Review and a Final Review. NOTE: Your Form 471 may return to Initial Review status at any time before a Funding Commitment Decision Letter is issued.
Available for Final Review	Your Form 471 review has completed Initial Review and is awaiting assignment for Final Review. All applications must complete both an Initial Review and a Final Review.
Final Review	Your Form 471 has been assigned for Final Review. All applications must receive both an Initial Review and a Final Review. NOTE: Your Form 471 may return to Final Review status at any time before a Funding Commitment Decision Letter is issued.
Available for Quality Assurance	Your Form 471 has completed Final Review. Your Form 471 may be assigned for Quality Assurance Review. Quality Assurance Review verifies that the Initial Review and Final Review procedures were properly performed.
Quality Assurance 1	Your Form 471 has been assigned for a first-level Quality Assurance Review. Quality Assurance Review verifies that the Initial Review and Final Review procedures were properly performed.
Quality Assurance 2	

FCC Form 471

Approval by OMB
3060-0806

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

Estimated Average Burden Hours per Response: 4 hours

This form is designed to help schools and libraries to list the eligible 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. (You can also file online at www.usac.org/sl.)

The instructions include information on the deadlines for filing this application.

Applicant's Form Identifier (Create an identifier for your own reference) FY2014 - SPT471	Form 471 Application #: 994649 (To be assigned by administrator)
--	--

Block 1: Billed Entity Address and Identifications

1 Name of Billed Entity
GUFFEY COMMUNITY CHARTER SCHOOL

2 Funding Year 2014

3a Entity Number 94343

3b FCC Registration Number 0014222723

4a Street Address, P.O. Box, or Route Number
1459 MAIN ST

City GUFFEY State CO Zip Code 80820-9505

4b Telephone Number (719) 689-2093

4c Fax Number (719) 689-3407

5a Type of Application (check only one)

- Individual School (individual public or non-public school)
- School District (LEA; public or non-public [e.g. diocesan] local district representing multiple schools)
- Library (including library system, library outlet/branch or library consortium as defined under LSTA)
- Consortium (intermediate service agencies, states, state networks, special consortia of schools and/or libraries)
- Statewide application for (enter 2-letter state code) representing (check all that apply)
 - All public schools/districts in the state
 - All non-public schools in the state
 - All libraries in the state

5b Recipient(s) of Services:

- Private Public Charter
- Tribal Head Start State Agency

Entity Number: 94343	Applicant's Form Identifier: FY2014 - SPT471
Contact Person: Kim McAlear	Contact Phone Number: (719) 689-2093

Block 1: Billed Entity Address and Identifications (continued)

6a Contact Person's Name
Kim McAlear

If the Contact Person's Street Address is the same as **Item 4** above, check here. If not, complete Item 6b.

6b Street Address, P.O. Box, or Route Number
NOTE: USAC will use this address to mail correspondence about this form.
1459 MAIN ST

City GUFFEY State CO Zip Code 80820-9505

Check the box next to your preferred mode of contact and provide your contact information. One box **MUST** be checked and an entry provided.

- 6c** Telephone Number (719) 689 - 2093
- 6d** Fax Number (719) 689 - 3407
- 6e** E-Mail Address kim@mtnsupport.com
Re-enter E-mail Address kim@mtnsupport.com

6f Holiday/vacation/summer contact information: please include name of alternate contact (if applicable) and alternate phone, fax or E-mail address myself, Kim McAlear, at (719) 689-5996

If a consultant is assisting you with your application process, please complete Item 6g below:

6g Consultant Name
Name of Consultant's Employer
Consultant's Street Address

City State Zip Code
Consultant's Telephone Number Ext.
Consultant's Fax Number
Consultant's E-mail Address
Re-enter E-mail Address
Consultant Registration Number

Blocks 2 and 3 [Reserved]

Entity Number: 94343										Applicant's Form Identifier: FY2014 - SPT471				
Contact Person: Kim McAlear										Contact Phone Number: (719) 689-2093				
Block 4: Discount Calculation Worksheet										Worksheet - 1736325 Page 1 of 1				
<p>The Block 4 worksheet is used to calculate your discount for services. You will complete one or more worksheets depending on the type of application you are filing. If you file more than one worksheet, please number the completed worksheets to assure that they are all processed correctly. Please refer to the instructions for information specific to the Type of Application you indicated in Block 1, Item 5.</p> <p><input type="checkbox"/> Check here if this worksheet contains all eligible entities in the school district or library system.</p>														
9a List entities and calculate discount(s):										(For Administrator's Use)				
School District or Library System Name:										School District or Library System Entity Number:				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Name of Eligible Entity	Entity Number AND NCES Code (for Schools) or FSCS Code (for Libraries)	Urban or Rural U or R	Total Number of Students	Number of Students Eligible for NSLP	Percent of Students Eligible for NSLP (Col. 5 / Col. 4)	Disc. from Disc. Matrix	New Construction	Admin Entity or NIF	Alt Disc Mech	Weighted Product for Calculating Shared Discount (Col. 4 x Col. 7)	Insert appropriate codes(s): P= pre-K, H = Head Start, A = Adult Education, J = Juvenile Justice, E = ESA, D = Dormitory	Entity Number of School District in which Library Outlet/Branch is Located	Discount of Member Entity	Shared Discount
ALL ENTITIES			SCHOOLS AND LIBRARIES							Schools with shared services	Schools	Library Outlet/Branch	Consortia	
GUFFEY COMMUNITY CHARTER SCHOOL	94343 08 03840 01695	R	24	13	54.167%	80	N	N	N	1920				
9b Shared Services														
SCHOOL DISTRICTS: (Including groups of schools within school districts.) Calculate the totals of Columns 4 and 11. Divide the total of Column 11 by the total of Column 4. Enter the result in Column 15.			24							1920				80%
LIBRARY SYSTEMS: Calculate the total of Column 7. Divide this total by the number of outlets/branches. Enter the result in Column 15.														
CONSORTIA: Calculate the total of Column 14. Divide this total by the number of member entities. Enter the result in Column 15.														

Entity Number: 94343		Applicant's Form Identifier: FY2014 - SPT471																									
Contact Person: Kim McAlear		Contact Phone Number: (719) 689-2093																									
Block 5: Discount Funding Request(s) 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 needed, and number the completed pages to assure that they are all processed correctly.		Block 5, page 1 of 1 FRN 2712048 (to be assigned by administrator)																									
10 <input type="checkbox"/> If this is a duplicate Funding Request (e.g., of an FRN that is not yet approved, under appeal, etc.), check this box and enter the original FRN in the space provided:																											
11 Category of Service (only ONE category should be checked) <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 2px;"> PRIORITY 1 <input type="checkbox"/> Telecommunications Service </td> <td style="width:50%; padding: 2px;"> PRIORITY 2 <input type="checkbox"/> Internal Connections Other than Basic Maintenance </td> </tr> <tr> <td style="padding: 2px;"> <input checked="" type="checkbox"/> Internet Access </td> <td style="padding: 2px;"> <input type="checkbox"/> Basic Maintenance of Internal Connections </td> </tr> </table>		PRIORITY 1 <input type="checkbox"/> Telecommunications Service	PRIORITY 2 <input type="checkbox"/> Internal Connections Other than Basic Maintenance	<input checked="" type="checkbox"/> Internet Access	<input type="checkbox"/> Basic Maintenance of Internal Connections	23 Calculations																					
PRIORITY 1 <input type="checkbox"/> Telecommunications Service	PRIORITY 2 <input type="checkbox"/> Internal Connections Other than Basic Maintenance																										
<input checked="" type="checkbox"/> Internet Access	<input type="checkbox"/> Basic Maintenance of Internal Connections																										
12 Form 470 Application Number 687640001237147		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;"></td> <td style="width:5%; text-align: center;">A.</td> <td>Monthly charges (total amount per month for service)</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td style="text-align: right;">\$615.00</td> </tr> <tr> <td></td> <td></td> <td>B. How much of the amount in A is ineligible?</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td></td> <td></td> <td>C. Eligible monthly pre-discount amount (A minus B)</td> <td style="text-align: right;">\$615.00</td> </tr> <tr> <td></td> <td></td> <td>D. Number of months service provided in funding year</td> <td style="text-align: right;">11</td> </tr> <tr> <td></td> <td></td> <td>E. Annual pre-discount amount for eligible recurring charges (C x D)</td> <td style="text-align: right;">\$6,765.00</td> </tr> </table>			A.	Monthly charges (total amount per month for service)					\$615.00			B. How much of the amount in A is ineligible?	\$0.00			C. Eligible monthly pre-discount amount (A minus B)	\$615.00			D. Number of months service provided in funding year	11			E. Annual pre-discount amount for eligible recurring charges (C x D)	\$6,765.00
	A.			Monthly charges (total amount per month for service)																							
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		D. Number of months service provided in funding year	11																								
		E. Annual pre-discount amount for eligible recurring charges (C x D)	\$6,765.00																								
13 SPIN – Service Provider Identification Number 143035627																											
14 Service Provider Name CableCo, LLC																											
15a <input type="checkbox"/> Check this box if this Funding Request is for non-contracted tariffed or month-to-month services.																											
15b Contract Number NA																											
15c <input type="checkbox"/> Check this box if this Funding Request is covered under a master contract (a contract negotiated by a third party, the terms and conditions of which are then made available to an eligible entity that purchases directly from the service provider). 15d <input type="checkbox"/> Check this box if this Funding Request is a continuation of an FRN from a previous funding year based on a multi-year contract. If so, provide that FRN here:																											
16a Billing Account Number (e.g., billed telephone number)																											
16b <input type="checkbox"/> Check this box if there are multiple Billing Account Numbers and attach a complete list of those numbers to this page.																											
17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 05/23/2014		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;"></td> <td style="width:5%; text-align: center;">F.</td> <td>Annual non-recurring charges</td> <td style="text-align: right;">\$2,500.00</td> </tr> <tr> <td></td> <td></td> <td>G. How much of the amount in F is ineligible?</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td></td> <td></td> <td>H. Annual eligible pre-discount amount for non-recurring charges (F minus G)</td> <td style="text-align: right;">\$2,500.00</td> </tr> <tr> <td></td> <td></td> <td>I. Total funding year pre-discount amount (E + H)</td> <td style="text-align: right;">\$9,265.00</td> </tr> <tr> <td></td> <td></td> <td>J. Discount from Block 4 Worksheet</td> <td style="text-align: right;">80.00</td> </tr> <tr> <td></td> <td></td> <td>K. Funding Commitment Request (I x J)</td> <td style="text-align: right;">\$7,412.00</td> </tr> </table>			F.	Annual non-recurring charges	\$2,500.00			G. How much of the amount in F is ineligible?	\$0.00			H. Annual eligible pre-discount amount for non-recurring charges (F minus G)	\$2,500.00			I. Total funding year pre-discount amount (E + H)	\$9,265.00			J. Discount from Block 4 Worksheet	80.00			K. Funding Commitment Request (I x J)	\$7,412.00
	F.			Annual non-recurring charges	\$2,500.00																						
				G. How much of the amount in F is ineligible?	\$0.00																						
				H. Annual eligible pre-discount amount for non-recurring charges (F minus G)	\$2,500.00																						
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		J. Discount from Block 4 Worksheet	80.00																								
		K. Funding Commitment Request (I x J)	\$7,412.00																								
18 Contract Award Date (mm/dd/yyyy) 05/23/2014																											
19 Service Start Date (mm/dd/yyyy) 08/01/2014																											
20a Service End Date (mm/dd/yyyy)																											
20b Contract Expiration Date (mm/dd/yyyy) 07/31/2017																											
21 Description of This Service: NOTE: All Item 21 Attachments must be filed before the close of the filing window. Attachment You MUST attach a description of the service, including a breakdown of components, costs, manufacturer name, make and model number. You must include any additional account or telephone numbers if the billed account has multiple numbers. Label the description with an Attachment Number, and note number in space provided. <table style="width:100%; margin-top: 10px;"> <tr> <td style="width:70%;"></td> <td style="width:30%; text-align: right;">1</td> </tr> </table>					1																						
	1																										
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: 94343																									
		b. If the service is shared by all entities on a Block 4 worksheet, list the worksheet number (e.g., 1):																									

Entity Number: 94343	Applicant's Form Identifier: FY2014 - SPT471
Contact Person: Kim McAlear	Contact Phone Number: (719) 689-2093

Block 5 (Continued):

24 Description of Broadband and other Connectivity Services Ordered for Schools and Libraries from this funding request

Complete the information below for this funding request only if requesting **Telecommunications Services** or **Internet Access** for the purpose of providing broadband and other types of connectivity to school and/or library facilities.

Check this box if this request is for services or equipment that do **not** provide broadband or connectivity. For instance, check the box if this funding request is for internal connections, basic maintenance, or requests for services like e-mail or phone service.

a Which technology(ies) and speed(s) are being provided in this Funding Request? Please list the number of lines and average download speed for the lines included in this funding request. If there are multiple download speeds for the lines within one type of broadband connection, this form provides two additional lines per broadband connection category. If you need additional space, please make copies of this page and number the completed pages to assure that they are all processed correctly. A response to this Item is not a substitute for a complete response to Item 21 but should be consistent with the description of services in the response to Item 21. Please ask your service provider if you need assistance.

Type of Connection	Number of lines included in this FRN	Download speed per line in Mbps
Non-Cellular Wireless (e.g.microwave)	1	15

b If the Internet service is available to students or patrons in more than just a single location or office, please indicate:

1.	If the access is provided by wired connections, approximately what percentage of the school classroom or public library rooms included in the Block 4 worksheet for this FRN will have access to wired drops? <u>100</u> %
2.	If the access is provided by Wi-Fi connections, approximately what percentage of the school classroom or public library rooms included in the Block 4 worksheet for this FRN will have access to a Wi-Fi signal? <u>100</u> %

c For consortia and statewide applications, do the connections in this FRN include the last mile connection to the school or library? Yes No
 If **no** above, are these connections only for backbone connections? Yes No

Entity Number: 94343		Applicant's Form Identifier: FY2014 - SPT471	
Contact Person: Kim McAlear		Contact Phone Number: (719) 689-2093	
Block 6: Certifications and Signature			
<p>25 <input checked="" type="checkbox"/> I certify that the entities listed in Block 4 of this application are eligible for support because they are: (Check one or both.)</p> <p>a <input checked="" type="checkbox"/> schools under the statutory definitions of elementary and secondary schools found in the No Child Left Behind Act of 2001, 20 U.S.C. §§ 7801(18) and (38), that do not operate as for-profit businesses and do not have endowments exceeding \$50 million; and/or</p> <p>b <input type="checkbox"/> 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, secondary schools, colleges, or universities.</p> <p>26 <input checked="" type="checkbox"/> I certify that the entity I represent or the entities listed on this application have secured access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity, necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support. I certify that the entities I represent or the entities listed on this application have secured access to all of the resources to pay the discounted charges for eligible services from funds to which access has been secured in the current funding year. I certify that the Billed Entity will pay the non-discount portion of the cost of the goods and services to the service provider(s).</p>			
a	Total funding year pre-discount amount on this Form 471 (Add the entries from Items 23I on all Block 5 Discount Funding Requests.)	9265	
b	Total funding commitment request amount on this Form 471 (Add the entries from Items 23K on all Block 5 Discount Funding Requests.)	7412	
c	Total applicant non-discount share (Subtract Item 26b from Item 26a.)	1853	
d	Total budgeted amount allocated to resources not eligible for E-rate support	0	
e	Total amount necessary for the applicant to pay the non-discount share of the services requested on this application AND to secure access to the resources necessary to make effective use of the discounts. (Add Items 26c and 26d.)	1853	
f	<input type="checkbox"/> Check this box if you are receiving any of the funds in Item 26e directly from a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year, or if a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year assisted you in locating funds in Item 26e.		
<p>27 <input checked="" type="checkbox"/> I certify that, if required by Commission rules, all of the individual schools and libraries receiving services under this form are covered by technology plans that do or will cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body or an SLD-certified technology plan approver prior to the commencement of service.</p> <p>Or <input type="checkbox"/> I certify that no technology plan is required by Commission rules.</p> <p>28 <input checked="" type="checkbox"/> I certify that (if applicable) I posted my Form 470 and (if applicable) made any related RFP available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted were carefully considered and the most cost-effective service offering was selected, with price being the primary factor considered, and is the most cost-effective means of meeting educational needs and technology plan goals.</p> <p>29 <input checked="" type="checkbox"/> I certify that the entity responsible for selecting the service provider(s) has reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that the entity or entities listed on this application have complied with them.</p> <p>30 <input checked="" type="checkbox"/> I certify that the services the applicant purchases at discounts provided by 47 U.S.C. § 254 will be used primarily for educational purposes and will not be sold, resold or transferred in consideration for money or any other thing of value, except as permitted by the Commission's rules at 47 C.F.R. §§ 54.500, 54.513. Additionally, I certify that the entity or entities listed on this application have not received anything of value or a promise of anything of value, other than services and equipment sought by means of this form, from the service provider, or any representative or agent thereof or any consultant in connection with this request for services.</p> <p>31 <input checked="" type="checkbox"/> I certify that I and the entity(ies) I represent have complied with all program rules, including recordkeeping requirements, and I acknowledge that failure to do so may result in denial of discount funding and/or cancellation of funding commitments. There are signed contracts covering all of the services listed on this Form 471 except for those services provided under non-contracted tariffed or month-to-month arrangements. I acknowledge that failure to comply with program rules could result in civil or criminal prosecution by the appropriate law enforcement authorities.</p>			

Entity Number: 94343		Applicant's Form Identifier: FY2014 - SPT471	
Contact Person: Kim McAlear		Contact Phone Number: (719) 689-2093	
Block 6: Certification and Signature (Continued)			
<p>32 <input checked="" type="checkbox"/> I acknowledge 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.</p> <p>33 <input checked="" type="checkbox"/> I certify that I will retain required documents for a period of at least five years (or whatever retention period is required by the rules in effect at the time of this certification) after the last day of service delivered. I certify that I will retain all documents necessary to demonstrate compliance with the statute and Commission rules regarding the application for, receipt of, and delivery of services receiving schools and libraries discounts, and that if audited, I will make such records available to the Administrator. I acknowledge that I may be audited pursuant to participation in the schools and libraries program.</p> <p>34 <input checked="" type="checkbox"/> I certify that I am authorized to order telecommunications and other supported services for the eligible entity(ies) listed on this application. I certify that I am authorized to submit this request on behalf of the eligible entity(ies) listed on this application, that I have examined this request, that all of the information on this form is true and correct to the best of my knowledge, that the entities that are receiving discounts pursuant to this application have complied with the terms, conditions and purposes of the program, that no kickbacks were paid to anyone and that false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001 and civil violations of the False Claims Act.</p> <p>35 <input checked="" type="checkbox"/> I acknowledge that FCC rules provide that persons who have been convicted of criminal violations or held civilly liable for certain acts arising from their participation in the schools and libraries support mechanism are subject to suspension and debarment from the program. I will institute reasonable measures to be informed, and will notify USAC should I be informed or become aware that I or any of the entities listed on this application, or any person associated in any way with my entity and/or the entities listed on this application, is convicted of a criminal violation or held civilly liable for acts arising from their participation in the schools and libraries support mechanism.</p> <p>36 <input checked="" type="checkbox"/> I certify that if any of the Funding Requests on this Form 471 are for discounts for products or services that contain both eligible and ineligible components, that I have allocated the eligible and ineligible components as required by the Commission's rules at 47 C.F.R. § 54.504(g)(1), (2).</p> <p>37 <input checked="" type="checkbox"/> I certify that this funding request does not constitute a request for internal connections services, except basic maintenance services, in violation of the Commission requirement that eligible entities are not eligible for such support more than twice every five funding years as required by the Commission's rules at 47 C.F.R. § 54.506(c).</p> <p>38 <input checked="" type="checkbox"/> I certify that the non-discount portion of the costs for eligible services will not be paid by the service provider. The pre-discount costs of eligible services featured on this Form 471 are net of any rebates or discounts offered by the service provider. I acknowledge that, for the purpose of this rule, the provision, by the provider of a supported service, of free services or products unrelated to the supported service or product constitutes a rebate of some or all of the cost of the supported services.</p>			
39 Signature of authorized person <input checked="" type="checkbox"/>		40 Date 05/23/2014	
<p>41 Printed name of authorized person Kimberly Ann McAlear</p> <p>42 Title or position of authorized person Bookkeeper</p> <p><input type="checkbox"/> Check here if the consultant in Item 6g is the Authorized Person.</p> <p>43a Street Address, P.O. Box, or Route Number 1459 Main Street</p> <p>City Guffey State CO Zip Code 80820-</p>			

Entity Number: 94343		Applicant's Form Identifier: FY2014 - SPT471	
Contact Person: Kim McAlear		Contact Phone Number: (719) 689-2093	
43b	Telephone Number of authorized Person	(719) 689-2093	Ext.
43c	Fax Number of Authorized Person	(719) 340-3407	
43d	E-mail Address of authorized Person	kim@mtnsupport.com	
	Re-enter E-mail Address	kim@mtnsupport.com	
43e	Name of Authorized Person's Employer	Guffey Community Charter School	

NOTICE: 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(c). 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 47C.F.R. § 54.504. All schools and libraries planning to order services eligible for universal service discounts must file this form themselves or as part of a consortium.

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

The FCC is authorized under the Communications Act of 1934, as amended, to collect the 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 any applicable 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. In addition, consistent with the Communications Act of 1934, FCC regulations and orders, the Freedom of Information Act, 5 U.S.C. § 552, or other applicable law, information provided in or submitted with this form or in response to subsequent inquiries may be disclosed to the public.

If you owe a past due debt to the Federal government, the 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 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 Forms
ATTN: SLD Form 471
3833 Greenway Drive
Lawrence, Kansas 66046
(888) 203-8100

FCC Form 471 - December 2013

Close Print Preview

Previous



Item 21 Attachment

Internet Access - Funding Year 2014

Information NOT yet sent to USAC.

Applicant Name GUFFEY COMMUNITY CHARTER SCHOOL
Billed Entity Number 94343
Form 471 Application Number 994649
Funding Request Number 2712048
Service Provider CableCo, LLC
Attachment Number 1
Narrative description of this Funding Request Internet access for students and staff

Service Type	Service Description	Eligible Pre-Discount Cost	
1 Broadband Internet Access (e.g. T-1, DSL, Frame Relay, Cable Modem, Wireless)	Internet access for students and staff		\$9,265.00
		Number of InternetAccess Lines (if applicable)	0
		Recurring Charges	Non Recurring Charges
Monthly Recurring Charges		\$615.00	One-time non-recurring charges \$2,500.00
Less Ineligible Amount (if any)		\$0.00	Less Ineligible Amount (if any) \$0.00
Number of Months		11	
Eligible recurring charges		\$6,765.00	Eligible non-recurring charges \$2,500.00
			Line item TOTAL \$9265
		Total:	\$9,265.00
		Funding Requested on 471:	\$9,265.00

Date Submitted - pending submission -



[FRN listing](#)

Online Item 21 Attachment

Your Item 21 Attachment for FRN 2712048, Application 94343 has been received on 5/23/2014 5:31:37 PM.

Please press the PRINT button for a copy of your Item 21 Attachment.

Retain that printout as confirmation of your submission of your Item 21 Attachment. You must retain all records (including bills, invoices, and contracts) related to your application for receipt and delivery of discounted services for a period of five years after the last day of services delivered for a particular Funding Year.

[Print Summary Listing](#)

[Print Detailed Listing](#)

[SLD Home](#) | Phone: 1-888-203-8100 | [Submit a Question](#)

E-RATE Request for Quote for Internet Service

1459 Main Street
PO Box 147
Guffey, Colorado 80820
Phone: (719) 689-2093
Fax (719) 689-3407

www.guffeyschool.org

The Guffey Community Charter School is accepting quotes for eligible services as defined by Schools and Libraries Division (SLD) of the Universal Services Administration Company (USAC) – <http://www.usac.org/s/>.

The following service is sought:

Internet Service

Detailed information on the service sought is found below. Inquiries should be directed to Kim McAlear, Bookkeeper, at kmcalear@guffeyschool.org or (719) 689-5996. All quotes must be submitted no later than May 22, 2014 and must be delivered either by ground delivery, fax, or by email:

Ground Delivery

Guffey Community Charter School
Attn: Kim McAlear
1459 Main Street
Guffey, CO 80820

FAX

(719) 689-3407

E-Mail

kmcalear@guffeyschool.org

All proposals will be evaluated according to price, suitability, and ability to support load requested.

The Guffey Community Charter School reserves the right to reject any or all proposals. We also reserve the right to check references.

General Facts and Information:

1. Service shall be provided for the school located at 1459 Main Street, Guffey, Colorado 80820.
2. We require at least 5 Mbps Download/1 Mbps Upload speed – but would like 20 Mbps Download/5 Mbps Upload speed, if possible.
3. There shall be no total bandwidth limitations, neither daily, monthly, nor annually.
4. There should be low latency (substantially less than typical satellite latency).
5. Service shall be able to support 35 simultaneous users.
6. Vendor must complete the worksheet on the following page and include with the quote.

GUFFEY COMMUNITY CHARTER SCHOOL INTERNET SERVICE WORKSHEET

Monthly Total for Internet Service \$ 615.00
One time installation fees \$ 2500.00
Contract Dates 7-1-14 to 6-30-17
(Should match the E-Rate Funding Year of 7/1/14 - 6/30/15 or include multiple Funding Years)
Total Cost for the Term of Contract \$ 24,640

Company Name Cable Co, LLC dba ghValley.net

Company Address PO Box 19579

City Colorado City State CO Zip Code 81019

Company Phone Number 719.676.4151

Sales Contact David Shipley Email Address dshipley@ghValley.net

Support Phone Number 719.676.4151



PO Box 19579
Colorado City, CO 81019
(888) 837.6400

May 23, 2014

Ms. Pam Moore
Guffey Community Charter School
1459 Main Street
Guffey Colorado 80820

Dear Ms. Moore,

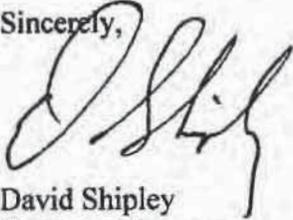
This letter serves as a proposal and agreement to provide data services to Guffey Community Charter School, 1459 Main Street Guffey Colorado 80820. CableCo, LLC (dba ghValley.net), an affiliate of South Park Telephone Company will deliver a (15) Meg / (3) Meg data connection to a demarcation point for a monthly fee of \$615.00 (SIX HUNDRED FIFTEEN DOLLARDS and NO CENTS), excluding taxes and surcharges, plus a non-reoccurring installation fee of \$2500.00 (TWENTY FIVE HUNDRED DOLLARS). There shall be no total bandwidth limitations placed on this service, neither daily, monthly, nor annually. The term of this agreement is for three (3) years and will begin on or before August 1, 2014 and expire on July 31, 2017. The agreement will automatically renew on a yearly bases (1-year) thereafter, provided both parties consent to the terms within the existing agreement and provided that Guffey Community Charter School receives sufficient eRate reimbursements such that its budgeted monthly cost, calculated over the previous year, does not exceed \$200. Guffey Community Charter School will make all necessary eRate filings in a timely fashion each year in an effort to receive the maximum reimbursement it is entitled to. In the event Guffey Community Charter School is unable to meet the full monthly cost (\$615.00) of the service, CableCo, LLC reserves the right to terminate this agreement. In the event the agreement expires or is terminated for any reason, CableCo, LLC is permitted to enter the property of Guffey Community Charter School and remove its equipment.

CableCo, LLC will retain ownership of all material and equipment to provide data services and only maintain data equipment owned by the Company. In the event CableCo, LLC is asked by Guffey Community Charter School to perform work outside the monitoring and repairing of Company owned equipment, a charge of \$75.00 per hour will be assessed to Guffey Community Charter School to perform such tasks. The data services are for the sole intended use and confines of Guffey Community Charter School and will not be marketed, distributed, sold, or utilized by persons not utilizing the services on Guffey Community Charter School property. Violation of this provision will result in immediate termination of services without notice.

Enclosed are two (2) copies of the agreement. Please confirm you accept the terms outlined herein by signing in the space provided below. In addition, enclosed are two (2) copies of the "Internet Terms of Service" for your review. Please initial each page of the document and return one (1) copy along with the signed agreement.

Please feel free to contact me @ 1.888.837.6400 with any questions.

Sincerely,



David Shipley
Business Manager

WHEREFORE, the parties have executed this Agreement as of the date first above written.

Guffey Community Charter School
Authorized Signature

Pam Moore
Name

School Adm.
Title

Pam
Signature

5/23/2014
Date