



Online Item 21 Attachment

You may use this automated system to create and electronically submit your Item 21 Attachment for FCC Form 471. To use this interface you must have already submitted an electronically-filed Form 471 and know the Security Code provided during that process.

For each Item 21 Attachment you file online, the service provider whose SPIN is featured on the associated FRN will be able to view and download the information specific to that FRN once you click the "Submit Item 21" button.

USAC encourages the use of this online filing system. However Item 21 Attachments also may be manually submitted by mail, by fax, or by e-mail. [Click here](#) for further information about manual filing options.

Please provide this information to begin.

Billed Entity Number:

Application Number:

Form 471 Security
Code:

[Continue](#) 

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Online Item 21 Attachment

The Billed Entity Number and Application Number you have entered are associated with the following Funding Request Number(s) (FRN). To begin the process please select "create attachment" from the status column below.

You must be a [person authorized](#) by the applicant shown to use this system.

To begin the process, please select from the status below.

EVERGREEN PARK COMM DIST 231

BEN: 135779

Application Number: 713579

Funding Request

No.:	FRN	Attachment #	Service Provider	Funding Category	Online Item 21 status
	1943262	I21_10_D231_ATT	Illinois Bell Teleph..	Telecom Services	create attachment
	1943273	I21_10_D231_CIM	CIMCO Communications..	Telecom Services	create attachment

Note: Item 21 status shown on this screen refers to online submissions only. Manually filed submissions are not included. If you have received a Funding Commitment Decision Letter (FCDL) for the Form 471 shown above, you may not create, edit, or submit an online Item 21 Attachment. Select "submitted online" to view an Item 21 Attachment that has already been submitted.

[Cancel](#)

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[FRN Listing](#)

Online Item 21 Attachment

The online Item 21 Attachment system allows the applicant to take these four steps:

1. Provide a narrative overview (general description) of the funding request.
2. Specify the line item details - quantities, descriptions, etc.
3. Provide additional information (when required) that will assist USAC in its review of the funding request.
4. Submit the Item 21 Attachment.

Your work is automatically saved as you proceed. You may exit the system and return to complete your work at a later time.

[Cancel](#)

Continue ▶

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[FRN Listing](#)

Part 1 of 4: Narrative Overview

Please provide a general description of the funding request in the box below.

Applicant Name	EVERGREEN PARK COMM DIST 231
Billed Entity Number	135779
Form 471 Application Number	713579
Funding Request Number	1943262
Service Provider	Illinois Bell Telephone Company
Attachment Number	I21_10_D231_ATT

Narrative description of this funding request: [Click here](#) for examples.

DS1 Service from single school school district to state supported ISP (Illinois Century Network)

Continue >

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[FRN Listing](#)

Part 2 of 4: Line Item Detail

Enter one or more line items that make up this funding request.

Eligibility Questions?

[Click Here to view the Eligible Services List.](#)

Applicant Name EVERGREEN PARK COMM DIST 231
Billed Entity Number 135779
Form 471 Application Number 713579
Funding Request Number 1943262
Service Provider Illinois Bell Telephone Company
Attachment Number I21_10_D231_ATT
Narrative description of this Funding Request DS1 Service from single school school district to state supported ISP (Illinois Century Network)

Tips & Hints

1. Enter one or more separate line items.
2. Don't forget sales tax or other miscellaneous charges.
3. Use the Description field if necessary to describe the request.
4. Only a single line item? [Click here](#) to import the cost information from your Form 471.
5. Be sure to enter the number of telecom lines (phone lines or data lines) when applicable.
6. When finished adding line items, your overall total should match the dollar amount indicated on your Form 471.

Add New Line Item ▶

[Service Type](#)

[Description](#)

Eligible Pre-Discount Cost

No Items Listed

Overall Total **Zero**
[Funding requested on Form 471](#) \$2,381.40

Add New Line Item ▶

Save and Exit ▶

Continue ▶

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[FRN Listing](#)

Part 2 of 4: Line Item Detail

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Billed Entity Number 135779
Form 471 Application Number 713579
Funding Request Number 1943262
Service Provider Illinois Bell Telephone Company
Attachment Number I21_10_D231_ATT
Narrative description of this Funding Request DS1 Service from single school district to state supported ISP (Illinois Century Network)

Provide the information requested below. Click on a field name to see further details.

Service Type	Description	Eligible Pre-Discount Cost																													
1 <input type="button" value="save"/> <input type="button" value="cancel"/> DTS - DS-1 Click here to import the cost information from your Form 471.	<input type="text"/>																														
Number of Telecom Lines (if applicable)		0																													
<table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">Recurring Charges</td> <td style="text-align: center;">Non Recurring Charges</td> </tr> <tr> <td> <table border="0" style="width: 100%;"> <tr> <td>Monthly Recurring Charges</td> <td style="text-align: right;">0.00</td> <td>One-time Non-Recurring Charges</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>Less Ineligible Amount (if any)</td> <td style="text-align: right;">0.00</td> <td>Less Ineligible Amount (if any)</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>Number of Months</td> <td style="text-align: right;">12</td> <td></td> <td></td> </tr> <tr> <td>Eligible Recurring Charges</td> <td style="text-align: right;">\$0.00</td> <td>Eligible Non-Recurring Charges</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td colspan="2"></td> <td style="text-align: right;">Line item TOTAL</td> <td style="text-align: right;">\$0.00</td> </tr> </table> </td> <td style="text-align: right;"> <input type="button" value="save"/> <input type="button" value="cancel"/> </td> </tr> <tr> <td colspan="2"></td> <td style="text-align: right;">Overall Total Zero</td> </tr> <tr> <td colspan="2"></td> <td style="text-align: right;">Funding requested on Form 471 \$2,381.40</td> </tr> </table>		Recurring Charges	Non Recurring Charges	<table border="0" style="width: 100%;"> <tr> <td>Monthly Recurring Charges</td> <td style="text-align: right;">0.00</td> <td>One-time Non-Recurring Charges</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>Less Ineligible Amount (if any)</td> <td style="text-align: right;">0.00</td> <td>Less Ineligible Amount (if any)</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>Number of Months</td> <td style="text-align: right;">12</td> <td></td> <td></td> </tr> <tr> <td>Eligible Recurring Charges</td> <td style="text-align: right;">\$0.00</td> <td>Eligible Non-Recurring Charges</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td colspan="2"></td> <td style="text-align: right;">Line item TOTAL</td> <td style="text-align: right;">\$0.00</td> </tr> </table>	Monthly Recurring Charges	0.00	One-time Non-Recurring Charges	0.00	Less Ineligible Amount (if any)	0.00	Less Ineligible Amount (if any)	0.00	Number of Months	12			Eligible Recurring Charges	\$0.00	Eligible Non-Recurring Charges	\$0.00			Line item TOTAL	\$0.00	<input type="button" value="save"/> <input type="button" value="cancel"/>			Overall Total Zero			Funding requested on Form 471 \$2,381.40
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[FRN Listing](#)

Part 2 of 4: Line Item Detail

Enter one or more line items that make up this funding request.

Eligibility Questions?

[Click Here to view the Eligible Services List.](#)

Tips & Hints

1. Enter one or more separate line items.
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Applicant Name EVERGREEN PARK COMM DIST 231
Billed Entity Number 135779
Form 471 Application Number 713579
Funding Request Number 1943262
Service Provider Illinois Bell Telephone Company
Attachment Number I21_10_D231_ATT
Narrative description of this Funding Request DS1 Service from single school school district to state supported ISP (Illinois Century Network)

Provide the information requested below. Click on a field name to see futher details.

Service Type	Description	Eligible Pre-Discount Cost																
1 <input type="button" value="save"/> <input type="button" value="cancel"/> DTS - DS-1	<div style="border: 1px solid #ccc; width: 100%; height: 60px;"></div>																	
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	<table border="0" style="width: 100%;"> <tr> <td style="text-align: right;">198.45</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td style="text-align: right;">0.00</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td style="text-align: right;">12</td> <td></td> </tr> <tr> <td style="text-align: right;">\$2381.40</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td colspan="2" style="text-align: right;">Line item TOTAL</td> </tr> <tr> <td colspan="2" style="text-align: right;"><input type="button" value="save"/> <input type="button" value="cancel"/></td> </tr> </table>	198.45	0.00	0.00	0.00	12		\$2381.40	\$0	Line item TOTAL		<input type="button" value="save"/> <input type="button" value="cancel"/>		<table border="0" style="width: 100%;"> <tr> <td style="text-align: right;">Overall Total</td> <td style="text-align: right;">Zero</td> </tr> <tr> <td style="text-align: right;">Funding requested on Form 471</td> <td style="text-align: right;">\$2,381.40</td> </tr> </table>	Overall Total	Zero	Funding requested on Form 471	\$2,381.40
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Add New Line Item ▶

Service Type	Description	Eligible Pre-Discount Cost
1 <input type="checkbox"/>	DTS - DS-1	\$2,381.40
Overall Total		\$2,381.40
Funding requested on Form 471		\$2,381.40

Add New Line Item ▶

Save and Exit ▶

Continue ▶

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



[FRN Listing](#)

Part 4 of 4: Submit Item 21 Attachment

[Print Summary Listing](#) ▶

[Print Detailed Listing](#) ▶

Preview Screen

Note that you may be requested to provide further information that establishes whether the components requested can be funded, such as copies of previous bills for continuing services or copies of your service provider contract. Be sure to exclude ineligible or unsubstantiated charges from your funding request.

Applicant Name EVERGREEN PARK COMM DIST 231
Billed Entity Number 135779
Form 471 Application Number 713579
Funding Request Number 1943262
Service Provider Illinois Bell Telephone Company
Attachment Number I21_10_D231_ATT
Narrative description of this Funding Request DS1 Service from single school school district to state supported ISP (Illinois Century Network)

	Service Type	Service Description	Eligible Pre-Discount Cost
1	<input type="checkbox"/> DTS - DS-1		\$2,381.40
		Total:	\$2,381.40
		Funding Requested on 471:	\$2,381.40

Please review your information to be sure it is correct and complete.
Warning: Once submitted, the Item 21 Attachment information cannot be changed. However you can view your Item 21 Attachment using this online system.

[Edit Information](#) ▶ |
 [Save and Exit](#) ▶ |
 [Submit Item 21](#) ▶

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

[FRN listing](#)

Online Item 21 Attachment

Your Item 21 Attachment for FRN 1943262, Application 135779 has been received on 12/22/2009 11:05:52 AM.

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](#)

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Item 21 Attachment
Telecommunications - Funding Year 2010

Applicant Name EVERGREEN PARK COMM DIST 231
Billed Entity Number 135779
Form 471 Application Number 713579
Funding Request Number 1943262
Service Provider Illinois Bell Telephone Company
Attachment Number I21_10_D231_ATT
Narrative description of this Funding Request DS1 Service from single school school district to state supported ISP (Illinois Century Network)

Service Type	Service Description	Eligible Pre-Discount Cost	
1 DTS - DS-1			\$2,381.40
		Number of Telecom Lines (if applicable)	1
	Recurring Charges		Non Recurring Charges
	Monthly Recurring Charges	\$198.45	One-time non-recurring charges \$0.00
	Less Ineligible Amount (if any)	\$0.00	Less Ineligible Amount (if any) \$0.00
	Number of Months	12	
	Eligible recurring charges	\$2,381.40	Eligible non-recurring charges \$0.00
			Line item TOTAL \$2381.4
		Total:	\$2,381.40
	Funding Requested on 471:		\$2,381.40

Date Submitted 12/22/2009 11:05:52 AM