



(ECF) Form 472/BEAR for Reimbursement & Post-Commitment Changes

Lorrie Germann, State E-Rate Coordinator

ECF FCC Form 472/BEAR - Invoicing

ECF FCC Form 472: Billed Entity Applicant Reimbursement

- Purpose of ECF FCC Form 472 (BEAR)
 - Applicants file to request reimbursement for 100% of approved eligible service/equipment cost.

Direct Payment

- BEAR payments only via electronic transfer to applicant
- Billed Entities will be paid directly to bank account listed on SAM.gov
 - **If there have been any changes to the bank account since registering at SAM.gov, be sure to modify/correct your information.**

Before You Begin

ALL of the following conditions must occur before submitting an ECF FCC Form 472/BEAR to USAC:

- The applicant has received an ECF Funding Commitment Decision Letter (FCDL) from USAC approving requested services and/or equipment
- The applicant has registered and been approved at SAM.gov
- Different from E-Rate, you do not file a Form 486 before filing the BEAR!

ECF FCC Form 472/BEAR

Things to know:

- You may submit the ECF FCC Form 472 once a year for reimbursement for recurring services delivered during the entire year, or you may file more frequently (e.g., quarterly, bimonthly, monthly)
- You may submit a ECF FCC Form 472 application listing each ECF FRN even if from different service providers (unlike E-Rate where you file per service provider)
- You may request reimbursement prior to paying your service provider, but:
 - *“Applicants must pay their service provider within 30 days after receipt of funds and will be required to certify compliance and provide verification of payment to the service provider. USAC will reach out to request verification of payment to the service provider at a later date”.*
 - **You may not request reimbursement for monthly recurring service where the service has not been received yet.**

ECF FCC Form 472/BEAR

Things to know:

Per the FCC's most recent list of FAQs, each request for reimbursement must be accompanied by a vendor invoice supporting the amount requested.

Vendor invoices must include the level of detail needed for USAC to validate the following information during its review of this supporting documentation.

- *A date of the service for non-recurring charges, or a bill date for recurring charges that is consistent with what was entered on the ECF Form 472/474.*
- *A date of the service or bill that is acceptable based on the relevant funding period.*
- *The equipment or services provided are the same as what was approved on the ECF FCC Form 471 (unless modified pursuant to an approved post-commitment change) and are at or below the price approved on the ECF Form 471.*
- *The service provider who provided the equipment or services is the same as the service provider approved on the ECF Form 471 (unless modified pursuant to an approved post-commitment change).*
- *The service or equipment has been delivered.*

Deadline to File

- The ECF FCC Form 472 deadline for recurring service is 60 from the last day to receive service or 60 days after the end of the funding year of 6/30/2022 which is August 29, 2022.
- The invoice deadline for non-recurring charges is 60 days from the last date of delivery of equipment.
- **Per USAC's FAQs, equipment or other non-recurring services that have not been received when the applicant submits the BEAR application, applicants may use June 30, 2022, as the service end date and the invoicing deadline will be 60 days from the date of the funding commitment decision letter.**

ECF FCC Form 472/BEAR

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Click the box to accept

By signing in, I accept the [terms and conditions](#) of the USAC system.

Sign In

Dashboard

1 In accordance with the Supply Chain orders, new certifications have been added to the following forms: RHC - FCC Form 463 and High Cost & Lifeline - FCC Form 481. Service providers are required to submit these annual certifications. For additional info

Upcoming Dates

07/01 2021 | **FY2022 FCC Form 470 Becomes Available**

Schools and Libraries

E-rate Productivity Center (EPC) - E-rate Program participants use the E-rate Productivity Center to manage program processes, receive notifications and to contact customer service.

FCC Form 472 (BEAR) - Applicants file an FCC Form 472 (Billed Entity Applicant Reimbursement (BEAR) Form) to request reimbursement from USAC for the discount amount of the eligible products or services that the applicant has received and paid for in full.

3 **Emergency Connectivity Fund (ECF)** - Emergency Connectivity Fund participants use the ECF Portal to submit applications for reimbursement and review notifications regarding their program activities.

Go to <https://www.usac.org/e-rate/> and click on “Sign In” and log into OnePortal. Select the “Emergency Connectivity (ECF)” option.

ECF FCC Form 472/BEAR

The screenshot shows the ECF Dashboard interface. At the top, there are three tabs: 'My Organizations' (selected), 'My Forms and Requests', and 'My Pending Tasks'. Below the tabs is a notification bar that says 'Window closes in 12 days 14 hours 8 minutes'. A search bar is present with the placeholder text 'Search Applicant Entities' and a 'SEARCH' button. Below the search bar is a table with the following columns: BEN, BEN Name, City, State, Entity Type, and ACTIONS. The table contains one row with the following data: BEN: 146998, BEN Name: ABC Local School District, City: West Union, State: OH, Entity Type: School District. The 'ACTIONS' column for this row is expanded, showing two options: 'File FCC Form 471' and 'File ECF FCC Form 472/BEAR'. The 'File ECF FCC Form 472/BEAR' option is highlighted with a red box, and a red arrow points to it from below the screenshot.

BEN	BEN Name	City	State	Entity Type	ACTIONS
146998	ABC Local School District	West Union	OH	School District	File FCC Form 471 File ECF FCC Form 472/BEAR

From the ECF Dashboard, click on the “Actions” pull-down, and select “File ECF FCC Form 472/BEAR”.

ECF FCC Form 472/BEAR

Bear FCC Form 472 – Emergency Connectivity Fund Reimbursement Application

ABC Local School District (BEN 123456) - Enter User Defined Nickname - #BEAR202100030

Request for Reimbursement Basic Information

Request for Reimbursement Line Item

Request for Reimbursement Summary

Request for Reimbursement Certifications

Request for Reimbursement Nickname

Please enter a request for reimbursement nickname here. ⓘ *

Enter User Defined Nickname

28/255

Contact Information

 Name Lorrie Smith

 Phone Number 740-555-1212

 Email lorrie.smith@abcshool.org

Entity Information

Billed Entity Name
ABC Local School District

Billed Entity Number
123456

DISCARD FORM

SAVE & CONTINUE

- Enter a nickname of your choice
- Click on “Save & Continue”

Note: Each section of the application will allow you to “Discard Form” if needed

ECF FCC Form 472/BEAR

Summary ECF Forms **Related Actions**

Bear FCC Form 472 – Emergency Connectivity Fund Reimbursement Application

ABC Local School District (BEN 123456) - Enter User Defined Nickname - #BEAR202100030

Request for Reimbursement Basic Information Request for Reimbursement Line Item Request for Reimbursement Summary Request for Reimbursement Certifications

<input type="checkbox"/>	Request for Reimbursement Line Number	FCC Form 471 Application Number	Funding Request Number (FRN)	Service Provider Identification Number (SPIN)	Service Provider Name	Billing Frequency	Customer Billed Date	Delivery Date	Amount Billed to USAC
No items available									

Total Amount Billed to USAC \$0.00

+ ADD REQUEST FOR REIMBURSEMENT LINE EDIT REQUEST FOR REIMBURSEMENT LINE REMOVE REQUEST FOR REIMBURSEMENT LINE

BACK DISCARD FORM SAVE & CONTINUE

- Click on “Add Request for Reimbursement Line”

ECF FCC Form 472/BEAR

Bear FCC Form 472 – Emergency Connectivity Fund Reimbursement Application

ABC Local School District (BEN: 123456) - Enter User Defined Nickname - #BEAR202100030

Request for Reimbursement Basic Information

Request for Reimbursement Line Item

Request for Reimbursement Summary

Request for Reimbursement Certifications

Filters (click to expand fields)

Select FRN

Please select a row to auto-populate the form details below.

FCC Form 471 Application Number	Funding Request Number (FRN)	FCC Form 471 Application Nickname	FRN Nickname	SPIN	Service Provider Name	Service Type	Total FRN Cost	Invoice Deadline Date / IDD
ECF202104382	ECF2190004680	ABC Local SD - 2021-22 ECF	Sprint - Existing 17 Hotspot-Data Plans Serving Patrons	143006742	Sprint Spectrum, L.P.	Services	\$4,689.96	8/29/2022
ECF202104382	ECF2190004679	ABC Local SD - 2021-22 ECF	Mobile Beacon - Existing 11 Hotspot-Data Plans Serving Patrons		Mobile Beacon	Services	\$1,452.00	8/29/2022
ECF202104382	ECF2190004678	ABC Local SD - 2021-22 ECF	T-Mobile - Existing 22 Hotspot-Data Plans Serving Patrons	143026181	T-Mobile USA, Inc.	Services	\$7,883.04	8/29/2022

Add New Request for Reimbursement Line

FCC Form 471 Application Number *

ECF202104382

Funding Request Number (FRN) *

ECF2190004678

FCC Form 471 Application Nickname *

ABC Local SD - 2021-22 ECF

Service Provider Identification Number (SPIN)

143026181

Service Provider Name

T-Mobile USA, Inc.

Total amount entered on this invoice for this FRN: \$0.00 Remaining FRN balance: \$7,883.04

- **All funded FRNs where BEAR was chosen on the Form 471 will be listed.** Note: the BEAR deadline is shown, but remember, if for equipment, the deadline is 60 days from last date of delivery!.
- Click on the row of the ECF FRN to select.
 - The information will auto-populate below. Scroll down to add cost detail.

ECF FCC Form 472/BEAR

Total amount entered on this invoice for this FRN: \$1,970.76 Remaining FRN balance: \$5,912.28

Billing Frequency *

Monthly

Requested Reimbursement Amount *

\$1,970.76

Attachment(s) *

UPLOAD  Drop files here

Please attach vendor/service provider invoice(s) or equivalent documents detailing the items or services purchased and per unit price for which you are requesting reimbursement.

Customer Billed Date

07/01/2021

Use this field for recurring services. The date entered should be the date of the first vendor invoice related to the services included on this line item.

Delivery Date

mm/dd/yyyy

Use this field for non-recurring charges such as equipment purchases and network construction. Enter the last date of delivery of equipment or last date of network construction for which reimbursement is being requested in this line item.

Are you submitting this request for reimbursement prior to paying your service provider for the requested equipment and services? *

N

Your Remaining FRN Balance includes previously approved invoices, invoices in review, as well as the line items you are currently entering on this invoice.

CANCEL

SAVE

- Select Billing Frequency (Monthly, One-Time, etc.)
- Enter the reimbursement amount. The remaining FRN balance will be shown above.
- Upload copy of invoice or equivalent documents – **this is required**
- Enter date in one of the two fields (**no not enter a date in both!**)
 - Customer Billed Date is for recurring service
 - Delivery Date is for non-recurring charges such as equipment
- Indicate if you are requesting reimbursement prior to paying the service provider, and then click on “Save”

ECF FCC Form 472/BEAR

Bear FCC Form 472 – Emergency Connectivity Fund Reimbursement Application

ABC Local School District (BEN: 123456) - test - #BEAR202100069

Request for Reimbursement Basic Information

Request for Reimbursement Line Item

Request for Reimbursement Summary

Request for Reimbursement Certifications

<input type="checkbox"/>	Request for Reimbursement Line Number	FCC Form 471 Application Number	Funding Request Number (FRN)	Service Provider Identification Number (SPIN)	Service Provider Name	Billing Frequency	Customer Billed Date	Delivery Date	Amount Billed to USAC
<input type="checkbox"/>	1	ECF202104382	ECF2190004678	143026181	T-Mobile USA, Inc.	Monthly	7/1/2021	N/A	\$1,970.76

Total Amount Billed to USAC \$1,970.76

+ ADD REQUEST FOR REIMBURSEMENT LINE

✓ EDIT REQUEST FOR REIMBURSEMENT LINE

✗ REMOVE REQUEST FOR REIMBURSEMENT LINE

BACK

DISCARD FORM

SAVE & CONTINUE

- Reimbursement detail will be shown in the table.
 - To make a correction, check the box to the left of the line you wish to correct, and click on “Edit Request for Reimbursement Line”
- To add another FRN for reimbursement, click on “Add Request for Reimbursement”
- If done adding, click on “Save & Continue”.

Adding Equipment FRN

FCC Form 471 Application Number	Funding Request Number (FRN)	FCC Form 471 Application Nickname	FRN Nickname	SPIN	Service Provider Name	Service Type	Total FRN Cost	Invoice Deadline Date / IDD
ECF202108012	ECF2190010123	ABC Local SD - 2021-22 ECF	Kajeet - Schoolbus WiFi	143034849	Kajeet, Inc.	Services	\$7,958.73	8/29/2022
ECF202108012	ECF2190010119	ABC Local SD - 2021-22 ECF	CDW-G - Chromebooks	143005588	CDW Government LLC	Equipment	\$183,916.98	8/29/2022
ECF202108012	ECF2190010115	ABC Local SD - 2021-22 ECF	Horizon - 62 Hotspot Broadband Service	143001654	The Telephone Company	Services	\$14,098.80	8/29/2022

Add New Request for Reimbursement Line

FCC Form 471 Application Number * ECF202108012	Service Provider Identification Number (SPIN) 143005588
Funding Request Number (FRN) * ECF2190010119	Service Provider Name CDW Government LLC
FCC Form 471 Application Nickname * ABC City Schools - 2021 ECF	

Total amount entered on this invoice for this FRN: \$183,916.98 Remaining FRN balance: \$0.00

Billing Frequency * One Time	Customer Billed Date <input type="text" value="mm/dd/yyyy"/>
Requested Reimbursement Amount * \$183,916.98	Use this field for recurring services. The date entered should be the date of the first vendor invoice related to the services included on this line item.
Attachment(s) *  	Delivery Date <input type="text" value="06/30/2022"/>
Please attach vendor/service provider invoice(s) or equivalent documents detailing the items or services purchased and per unit price for which you are requesting reimbursement.	Use this field for non-recurring charges such as equipment purchases and network construction. Enter the last date of delivery of equipment or last date of network construction for which reimbursement is being requested in this line item.
	Are you submitting this request for reimbursement prior to paying your service provider for the requested equipment and services? * <input type="text" value="Y"/>

Applicants must pay their service provider within 30 days after receipt of funds and will be required to certify compliance and provide verification of payment to the service provider. USAC will reach out to request verification of payment to the service provider at a later date.

Your Remaining FRN Balance includes previously approved invoices, invoices in review, as well as the line items you are currently entering on this invoice.

- Click on the row of the FRN you want to add, and provide the billing frequency, reimbursement amount, and delivery date.
- If submitting the request prior to paying the service provider, select “Yes”. The system will provide a reminder of paying the provider within 30 days of receiving the reimbursement. Click on “Save”

ECF FCC Form 472/BEAR

Bear FCC Form 472 – Emergency Connectivity Fund Reimbursement Application

ABC Local School District (BEN: 123456) - test - #BEAR202100069

Request for Reimbursement Basic Information		Request for Reimbursement Line Item			Request for Reimbursement Summary		Request for Reimbursement Certifications		
<input type="checkbox"/>	Request for Reimbursement Line Number	FCC Form 471 Application Number	Funding Request Number (FRN)	Service Provider Identification Number (SPIN)	Service Provider Name	Billing Frequency	Customer Billed Date	Delivery Date	Amount Billed to USAC
<input type="checkbox"/>	1	ECF202108012	ECF2190010123	143034849	Kajeet, Inc.	Monthly	7/1/2021	N/A	\$2,000.00
<input type="checkbox"/>	2	ECF202108012	ECF2190010119	143005588	CDW Government LLC	One Time	N/A	6/30/2022	\$183,916.98

Total Amount Billed to USAC \$185,916.98

[+ ADD REQUEST FOR REIMBURSEMENT LINE](#) [EDIT REQUEST FOR REIMBURSEMENT LINE](#) [X REMOVE REQUEST FOR REIMBURSEMENT LINE](#)

[BACK](#) [DISCARD FORM](#) [SAVE & CONTINUE](#)

- Reimbursement detail will be shown in the table.
 - To make a correction, check the box to the left of the line you wish to correct, and click on “Edit Request for Reimbursement Line”
- To add another FRN for reimbursement, click on “Add Request for Reimbursement”
- If done adding, click on “Save & Continue”.

ECF FCC Form 472/BEAR

Bear FCC Form 472 – Emergency Connectivity Fund Reimbursement Application

ABC Local School District (BEN: 123456) - test - #BEAR202100069

Request for Reimbursement Basic Information

Request for Reimbursement Line Item

Request for Reimbursement Summary

Request for Reimbursement Certifications

Total Reimbursement Amount Requested:

\$185,916.98

BACK

DISCARD FORM

SEND FOR CERTIFICATION

CONTINUE TO CERTIFICATION

- Verify the “Total Reimbursement Amount Requested”
- Click on “Continue to Certification” or “Send for Certification” to submit

ECF FCC Form 472/BEAR

Certifications

I declare under penalty of perjury that:

- I am authorized to submit this request for reimbursement on behalf of the above-named school, library or consortium and that based on information known to me or provided to me by employees responsible for the data being submitted, I hereby certify that the data set forth in this request for reimbursement has been examined and is true, accurate and complete. I acknowledge that any false statement on this request for reimbursement or on other documents submitted by this school, library or consortium 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), or can lead to liability under the False Claims Act (31 U.S.C. §§ 3729 - 3733).
- In addition to the foregoing, the school, library or consortium is in compliance with the rules and orders governing the Emergency Connectivity Fund Program, and I acknowledge that failure to be in compliance and remain in compliance with those rules and orders may result in the denial of funding, cancellation of funding commitments, and/or recoupment of past disbursements. I acknowledge that failure to comply with the rules and orders governing the Emergency Connectivity Fund Program could result in civil or criminal prosecution by law enforcement authorities.
- By signing this request for reimbursement, I certify that the information contained in this request for reimbursement is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, §§ 1001, 286-287 and 1341 and Title 31, §§ 3729-3730 and 3801-3812).
- The funds sought in the request for reimbursement are for eligible equipment and/or services that were purchased or ordered in accordance with the Emergency Connectivity Fund Program rules and requirements and received by either the school, library, or consortium, or the students, school staff, or library patrons as appropriate.
- The portion of the costs eligible for reimbursement and not already paid for by another source was either: paid for in full; or will be paid to the service provider within 30 days of receipt of funds by the school, library, or consortium.
- The amount for which the school, library, or consortium is seeking reimbursement from the Emergency Connectivity Fund consistent with the requirements set out in § 54.1707.
- The school, library, or consortium is not seeking Emergency Connectivity Fund reimbursement for eligible equipment and/or services that have been purchased and reimbursed in full with other pandemic relief federal funding (e.g., CARES Act, Emergency Broadband Benefit Program or other provisions of the American Rescue Plan), targeted state funding, other external sources of targeted funding, or targeted gifts or eligible for discounts from the schools and libraries universal service support mechanism or other universal service support mechanism.
- The equipment and services the school, library, or consortium purchased using Emergency Connectivity Fund support will be used primarily for educational purposes as defined in § 54.1700 and that the authorized person is not willfully or knowingly requesting reimbursement for equipment or services that are not being used.
- The equipment and services the school, library, or consortium purchased will not be sold, resold, or transferred in consideration for money or any other thing of value, except as allowed by § 54.1713.
- The school, library, or consortium recognizes that it may be subject to an audit, inspection or investigation pursuant to its request for reimbursement, that it will retain for ten years any and all records related to its request for reimbursement, and will make such records and equipment purchased with Emergency Connectivity Fund reimbursement available at the request of any representative (including any auditor) appointed by a state education department, the Administrator, the Commission and its Office of Inspector General, or any local, state or federal agency with jurisdiction over the entity.
- No kickbacks, as defined in 41 U.S.C. § 8701 and/or 42 U.S.C. § 1320a-7b, were paid or received by the applicant to anyone in connection with the Emergency Connectivity Fund.
- I certify that no Federal subsidy made available through a program administered by the Commission that provides funds to be used for the capital expenditures necessary for the provision of advanced communications services has been or will be used to purchase, rent, lease, or otherwise obtain, any covered communications equipment or service, or maintain any covered communications equipment or service previously purchased, rented, leased, or otherwise obtained, as required by 47 C.F.R. § 54.10.

[BACK](#)[DISCARD FORM](#)[CERTIFY](#)

- Read through each certification and check the box to the left.
- Click on “Certify” to complete

Creating Post-Commitment Changes

After you have received your ECF funding letter, you may discover that you need to make changes. This includes such changes as:

- Service Provider
- Invoicing Method
- Make/model of devices

When applying for ECF, we estimated the number of devices needed. If you discover that you estimated higher than what was needed, you may voluntarily reduce the quantity. This will return the funds and allow the limited ECF funding to be provided to another ECF applicant.

How to Make Changes

Good Afternoon
Lorrie Germann

My Organizations | **My Forms and Requests** | My Pending Tasks

Application Type: FCC Form 471

Search ECF FCC Forms 471 | SEARCH | APPLICATION STATUS: Any

BEN	BEN Name	Application Number	Application Nickname	Application Status
130012	ADENA LOCAL SCHOOL DISTRICT	ECF202102215	Adena ECF	Committed

Click on “My Forms and Requests” and then on the application number of a “Committed” form.

Adena ECF - #ECF202102215

Summary | Funding Requests | Unmet Needs | Certifications | Communications | **Related Actions**

- Contact Reviewer**
Click this link to contact your reviewer, to answer an inquiry, or to request a modification to your application.
- Create Appeal**
This function allows you to submit an appeal
- Create a Post-Commitment Request**
This function allows you to create a Post-Commitment request.

Click on “Related Actions” and then on “Create a Post-Commitment Request”.

How to Make Changes

ECF Post-Commitment Request

ABC Local School District (BEN: 123456) - test - #BEAR202100069

Basic Information

Post-Commitment Changes

Preview

Certifications

Submitting Organization Details

Entity Name ABC Local School District
Address 3367 COUNTY ROAD 550,
City FRANKFORT
State OH
Zip Code 45628

Phone Number 740-998-4633
Email
Billed Entity Number 130012

Change Requests *

Nickname *

Test Change

You are able to make any post commitment change requests on this form that are

-- Please select all that apply --

- Change Service Provider for Funding request (SPIN Change)
- Change service and/or Equipment associated with Funding request
- Change service start and /or end date
- Cancel a committed funding request
- Reduce funding amount on a committed request
- Update DUNS number
- Update FCC Registration Number
- Update Tax ID/EIN
- Update Invoicing Method
- Update Unmet Needs

Create a nickname and then click on pull-down to choose the change you'd like to make.

Narrative *

Please provide any additional information with regards to your change request(s) in the narrative box below.

To update DUNS number, FCC Registration Number, Tax ID/EIC or Unmet Needs responses, please provide the new values in the narrative box below. Changes to registration information may require updates to other systems such as SAM.gov (DUNS, Tax ID/EIC) and FCC CORS (FCC Registration Number, Tax ID/EIC).

The service provider listed for FRN123456789 is unable to get the requested devices, and has no other options available. Due to that, we are requesting to change providers from ABC Provider to XYZ Provider

Enter the narrative to explain why the change

Supporting Documents

Please upload all supporting documents for your Post Commitment Request in this section. You will not be able to add them when updating your funding request details.

Document	Uploaded On
No items available	

Upload documents such as new quote

Contact Information

Are you the main contact person?

YES ✓

NO

Select "Yes" to add contact info and then click on "Save & Continue"

Name Lorrie Germann

Phone Number 740-253-1153

FCC Notice Required By The Paperwork Reduction Act (OMB Control Number: 3060-1286)

Part 54 of the Federal Communications Commission's (FCC) rules authorize the FCC to collect the information requested in this form. Responses to the questions herein are required to obtain the benefits sought by this application. Failure to provide all requested information will delay processing or result in the form being returned for inspection. The information provided will be used to determine whether approving this request is in the public interest. We have estimated that each response to this collection of information will take 1.5 hour. Our estimate includes the time to read the instructions, look through existing records, gather and maintain the required information, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-1286), Washington, DC 20554. We will also accept your comments via the Internet if you send them to pra@fcc.gov. Please DO NOT respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1286.

DISCARD FORM

SAVE & CONTINUE

How to Make Changes

ECF Post-Commitment Request

ABC Local School District (BEN: 123456) - test - #BEAR202100069

Basic Information **Post-Commitment Changes** Preview Certifications

Funding Requests

1 Please select Funding Request to modify the Funding Request information. Use the "Edit Funding Request Key Information" option to request changes to key FRN information (e.g., contract type, service dates, service provider, and invoicing method.) Use the "View Line Items" option to request changes on the FRN line item services or equipment details.

2 If you are submitting this request to only update DUNS number, FCC Registration Number, Tax ID/EIC or Unmet Needs responses, you do not need to make any changes to the Funding Requests before continuing to next page.

FRN	Nickname	Number of Line Items
ECF2190002255	- Chromebooks	1
ECF2190011404	Mobile Beacon - Existing 308 Hotspot Service	1
ECF2190011406	Mobile Beacon - New 534 Hotspot Service	1

3 Please note that the values in the funding request information page will always display the values from the latest version of ECF FCC Form 471 application and the changes saved will not be reflected on the form when viewed during the post-commitment application.

[BACK](#) [DISCARD FORM](#) [VIEW LINE ITEMS](#) [EDIT FUNDING REQUEST KEY INFORMATION](#) [SAVE & CONTINUE](#)

Click on the row of the FRN you need to modify and then “Edit Funding Request Key Information” to step through the FRN info to make **changes to contract type, service dates, service provider, and invoicing method**. You will see all the same form options as when filing the Form 471. If changing provider, search for new provider. If not in database, manually add company info.

If changing line-item info such as **make/model**, click on “View Line Items”. Just like with E-Rate, if the cost of the new model is more expensive, ECF will not cover the difference.

When done, click on “Save & Continue”

“Edit Funding Request Key Info” View

ECF Post-Commitment Request 1

ABC Local School District (BEN: 123456) - test - #BEAR202100069

Basic Information | **Post-Commitment Changes** | Preview | Certifications

Funding Request Key Information

Please enter a Funding Request Nickname here *

CDW-G - Chromebooks

Service Type

What are the types of the products or services that you are requesting? *

Equipment

FRN Contract

Please identify the type of purchasing agreement for the products and services you are requesting.

How are the services for this FRN being purchased?

CONTRACT TARIFF NON-CONTRACTED ✓

Dates

What is the service start date? *

07/01/2021

When will the services end? *

06/30/2022

Service Provider 2

SPIN	Name	Doing Business As	State
143005588	CDW Government LLC	CDW-G	IL

Use the search tool below to find the establishing service provider

Search Service Provider

Search by SPIN Search by Name (Full or Partial)

Invoicing Method

Please indicate who will be submitting ECF reimbursement forms for this funding request. *

Applicant - FCC Form 472 (BEAR Form)

Service Provider - FCC Form 474 (SPI Form)

Document	Uploaded On
CDW-G - 738 Chromebooks	8/5/2021 6:35 PM EDT

Narrative 3

This request is for 738 Chromebooks to replace the currently connected devices that are at end of life and need to be replaced for students that lack sufficient access.

Supporting Documentation

Document	Uploaded On
CDW-G - 738 Chromebooks	8/5/2021 6:35 PM EDT

After clicking on “Edit Funding Request Key Information” make any changes to **contract type, service dates, service provider, and/or invoicing method**. Click on “Continue” to advance through the form sections, and then “Save”.

Changing Models/Service Providers or Reducing Quantities (to return funds)

ECF Post-Commitment Request

ABC Local School District (BEN: 123456) - test - #BEAR202100069

Basic Information **Post-Commitment Changes** Preview Certifications

Funding Requests

1 Please select Funding Request to modify the Funding Request information. Use the "Edit Funding Request Key Information" option to request changes to key FRN information (e.g., contract type, service dates, service provider, and invoicing method.) Use the "View Line Items" option to request changes on the FRN line item services or equipment details.

2 If you are submitting this request to only update DUNS number, FCC Registration Number, Tax ID/EIC or Unmet Needs responses, you do not need to make any changes to the Funding Requests before continuing to next page.

FRN	Nickname	Number of Line Items
ECF2190002255	- Chromebooks	1
ECF2190011404	Mobile Beacon - Existing 308 Hotspot Service	1
ECF2190011406	Mobile Beacon - New 534 Hotspot Service	1

1 Please note that the values in the funding request information page will always display the values from the latest version of ECF FCC Form 471 application and the changes saved will not be reflected on the form when viewed during the post-commitment application.

[BACK](#) [DISCARD FORM](#) [VIEW LINE ITEMS](#) [EDIT FUNDING REQUEST KEY INFORMATION](#) [SAVE & CONTINUE](#)

After saving your changes, you'll see the list of FRNs again. If you need to make additional changes, select the FRN and click on "View Line Items" or "Edit Funding Request Key Information".

When done, click on "Save & Continue"

“View Line Items”

View

Clicking on the funding request and then “View Line Items”. Click on the Line-Item row to select, and then “Edit Line Item” to make any changes to **make/model**.

Correct the cost if needed.

Funding Requests

Please select Funding Request to modify the Funding Request information. Use the “Edit Funding Request Key Information” option to request changes to key FRN information (e.g., contract type, service dates, service provider, and invoicing method.) Use the “View Line Items” option to request changes on the FRN line item services or equipment details.

If you are submitting this request to only update DUNS number, FCC Registration Number, Tax ID/EIC or Unmet Needs responses, you do not need to make any changes to the Funding Requests before continuing to next page.

FRN	Nickname	Number of Line Items
ECF2190010115	Horizon - 62 Hotspot Broadband Service	1
ECF2190010119	CDW-G - Chromebooks	1
ECF2190010123	Kajeet - Schoolbus WiFi	2

Please note that the values in the funding request information page will always display the values from the latest version of ECF FCC Form 471 application and the changes saved will not be reflected on the form when viewed during the post-commitment application.

VIEW LINE ITEMS **EDIT FUNDING REQUEST KEY INFORMATION**

Line Items for ECF2190010119

Please select the Funding Request Line Item to modify the Funding Request Line Item Information.

ID	Type of Product	Make	Model	Total Quantity	Total Cost
1	Laptops	Dell	3100 4/16 Chromebook	738	\$183,916.98

Please note that the values in the funding request line items information page will always display the values from the latest version of ECF FCC Form 471 application and the changes saved will not be reflected on the form when viewed during the post-commitment application.

EDIT LINE ITEM

BACK **DISCARD FORM** **SAVE & CONTINUE**

Commitment Request

ABC Local School District (BEN: 123456) - test - #BEAR202100069

Basic Information | Post-Commitment Changes | Preview | Certifications

Please enter the details for the products included in your request.

Type of Product * Laptops Make * Dell Model * 3100 4/16 Chromebook

Monthly Cost	One-Time Cost
Monthly Recurring Unit Cost \$0.00	One-Time Unit Cost \$249.21
Monthly Quantity 0	One-Time Quantity 738
Months of Service 0	Total One-Time Cost = \$183,916.98
Total Recurring Cost = \$0.00	Summary
	Total Cost = \$183,916.98

Please make the necessary changes. Note that certain fields are not editable for Post-Commitment Requests.

CANCEL **SAVE**

***Note: If you will not purchase the full quantity you were approved for, you may voluntarily reduce the count. This will allow funding to be provided to another ECF applicant. To do this, enter the corrected quantity.**

Click on “Save” to return to the Funding Request screen. Click on “Save & Continue” if done making changes.

Changing Models/Service Providers

ECF Post-Commitment Request

ABC Local School District (BEN: 123456) - test - #BEAR202100069

Basic Information Post-Commitment Changes **Preview** Certifications

Submitting Organization Details

Entity Name ABC Local School District	Phone Number 740-998-4633
Address 3367 COUNTY ROAD 550,	Email
City FRANKFORT	Billed Entity Number 130012
State OH	
Zip Code 45628	

Request Details: Change Type, Narrative and Supporting Documents >

Contact Information >

Requested Changes

<input type="checkbox"/>	Change Category	Number	Change Action Display Name	Old Value	New Value	Requested Datetime
<input type="checkbox"/>	Funding Request Details	ECF2190002255	Modify Service Provider	ITsavvy LLC	T-Mobile USA, Inc.	10/7/2021 5:34 PM EDT

REMOVE

BACK DISCARD FORM SEND FOR CERTIFICATION **CONTINUE TO CERTIFICATION**

Click on each section (Request Details, Contact Info, or Requested Changes) to see changes.

“Requested Changes” will show “Old Value” and “New Value”. If everything is correct, click on “Continue to Certification”, check the 3 boxes and then “Certify” complete

Basic Information Post-Commitment Changes Preview **Certifications**

Certifications

I declare under penalty of perjury that:

I certify under penalty of perjury that I am authorized to submit this application on behalf of the above-named applicant and that based on information known to me or provided to me by employees responsible for this data being submitted, I hereby certify that the data set forth in the application has been examined and is true, accurate, and complete. I acknowledge that any false statement on this application or on any other documents submitted by the applicant 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), or can lead to liability under the False Claims Act (31 U.S.C. §§ 3729-3733).

By signing this application, I certify that the information contained in this application is true, complete, and accurate, and the projected expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, §§ 1001, 286-287 and 1341 and Title 31, §§ 3729-3730 and 3801-3812).

The applicant recognizes that it may be audited pursuant to its application, that it will retain for ten years any and all records related to its application, and that, if audited, it shall produce shall records at the request of any representative (including any auditor) appointed by a state education department, the Administrator, the Commission and its Office of Inspector General, or any local, state, or federal agency with jurisdiction over the entity.

BACK DISCARD FORM **CERTIFY**



Contact Information



E-Rate Support and Information

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To subscribe to the E-Rate list, send an email with no message to join-erate@list.em.ohio.gov.