



# Commission Registration System (CORES)

Associate Username to FRN | Manage Existing  
FRNs & FRN Financial  
Register New FRN | Reset FRN Password  
| Search for FRN

## FCC Registration

[FCC](#) > [FCC Registration](#) > [Manage Existing FRNs](#) > [FRN Financial](#) > View/Pay

Logged In As: victory@fhhlaw.com | [Logout](#)

## Application Fees

[OPEN BILLS](#)

[APPLICATION FEES](#)

[AWAITING PAYMENT COMPLETION](#)

[PAYMENT HISTORY](#)

### Existing Application Fees

No Application Fee Data Found

	To Add More Application Fees
Lockbox/Bureau:	979089 - Media
PTC:	MVY
Call Sign:	KINB
Quantity:	1
FCC Code 1:	88376
FCC Code 2:	BDSTA20220222AAH
Total Fees:	\$ 210.0

[Add Application Fee](#)

[Go Back](#)

### Customer Service

[Help](#)

[Frequently Asked Questions](#)

[Privacy Statement](#)

[FCC Home Page](#)

For assistance, please submit a help request at <https://www.fcc.gov/wireless/available-support-services> or call 877-480-3201 (Mon.-Fri. 8 a.m.-6 p.m. ET).

**FCC Registration**[FCC](#) > [FCC Registration](#) > [Manage Existing FRNs](#) > [FRN Financial](#) > [View/Pay](#) > Payment ConfirmationLogged In As: [victory@fhhlaw.com](#) | [Logout](#)**Online Payment Confirmation**[Print](#)**Online Payment Confirmation**

Total Amount	\$210.00
Payer FRN	0026571836
Payer Name	victory@fhhlaw.com
Remittance ID	3741992
Treasury Tracking ID	26V2PUMI

Thank you for your payment!

[View Form159](#) [Go Back](#)**Customer Service**[Help](#)[Frequently Asked Questions](#)[Privacy Statement](#)[FCC Home Page](#)For assistance, please submit a help request at <https://www.fcc.gov/wireless/available-support-services> or call 877-480-3201 (Mon.-Fri. 8 a.m.-6 p.m. ET).

READ INSTRUCTIONS CAREFULLY  
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION  
**REMITTANCE ADVICE**

Approved by OMB  
3060-0589  
Page No 1 of 1

(1) LOCKBOX # <b>979089</b>		SPECIAL USE ONLY	
		FCC USE ONLY	
<b>SECTION A – PAYER INFORMATION</b>			
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card) <b>Perry Media Group LLC</b>		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) <b>210.00</b>	
(4) STREET ADDRESS LINE NO. 1 <b>1528 NE 23rd Street</b>			
(5) STREET ADDRESS LINE NO. 2			
<b>Oklahoma City</b>		(7) STATE <b>OK</b>	(8) ZIP CODE <b>73111</b>
(9) DAYTIME TELEPHONE NUMBER (include area code) <b>4054254100</b>		(10) COUNTRY CODE (if not in U.S.A.) <b>US</b>	
<b>FCC REGISTRATION NUMBER (FRN) REQUIRED</b>			
(11) PAYER (FRN) <b>0026571836</b>		(12) FCC USE ONLY	
<b>IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) COMPLETE SECTION BELOW FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET</b>			
(13) APPLICANT NAME <b>Perry Media Group LLC</b>			
(14) STREET ADDRESS LINE NO. 1 <b>1528 NE 23rd Street</b>			
(15) STREET ADDRESS LINE NO. 2			
<b>Oklahoma City</b>		(17) STATE <b>OK</b>	(18) ZIP CODE <b>73111</b>
(19) DAYTIME TELEPHONE NUMBER (include area code) <b>4054254100</b>		(20) COUNTRY CODE (if not in U.S.A.) <b>US</b>	
<b>FCC REGISTRATION NUMBER (FRN) REQUIRED</b>			
(21) APPLICANT (FRN) <b>0026571836</b>		(22) FCC USE ONLY	
<b>COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET</b>			
(23A) CALL SIGN/OTHER ID <b>KINB</b>	(24A) PAYMENT TYPE CODE <b>MVY</b>	(25A) QUANTITY <b>1</b>	
(26A) FEE DUE FOR (PTC) <b>210.00</b>	(27A) TOTAL FEE <b>210.00</b>	FCC USE ONLY	
(28A) FCC CODE 1 <b>88376</b>		(29A) FCC CODE 2 <b>BDSTA20220222AAH</b>	
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE	(25B) QUANTITY	
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE	FCC USE ONLY	
(28B) FCC CODE 1		(29B) FCC CODE 2	
<b>SECTION D – CERTIFICATION</b>			
<b>CERTIFICATION STATEMENT</b> I, _____, certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information and belief.  SIGNATURE _____ DATE _____			
<b>SECTION E - CREDIT CARD PAYMENT INFORMATION</b>			
MASTERCARD _____ VISA _____ AMEX _____ DISCOVER _____			
ACCOUNT NUMBER _____ EXPIRATION DATE _____			
I hereby authorize the FCC to charge my credit card for the service(s)/authorization herein described.			
SIGNATURE _____ DATE _____			