# FEDERAL COMMUNICATIONS COMMISSION REMITTANCE ADVICE

(1) LOCK BOX#				SPECIAL USE ONLY	
979089			<u> </u>	FCC USE ONLY	
				FCC USE ONL I	
(A) DAY(ED MANGE (IS		PAYER INFORMATI		DATE DATE OF COLUMN	
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card)  XL Media (CA) Inc.			(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) 290.00		
(4) STREET ADDRESS LINE NO.1			250.00		
1101 17th Street, N.W.					
(5) STREET ADDRESS LINE NO. 2					
Suite 1001					
(6) CITY Washington		(7) STATE  DC	(8) ZIP CODE 20036		
(9) DAYTIME TELEPHONE NUMBER (includ 2024524831	(10) COUNTRY CODE (if not in U.S.A.) US				
2024324031	FCC REGISTRATIO	ON NUMBER (FRN) R	EQUIRED		
(11) PAYER (FRN)		(12) FCC USE	ONLY		
0025673724					
IF MO	RE THAN ONE APPLICANT, ELOW FOR EACH SERVICE	USE CONTINUATIO	N SHEETS (FORM :	159-C)	
(13) APPLICANT NAME	ELOW FOR EACH SERVICE	L, IF MORE BOXES A	RE NEEDED, USE C	CONTINUATION SHEET	
XL Media (CA) Inc.					
(14) STREET ADDRESS LINE NO.1 1101 17th Street, N.W.					
(15) STREET ADDRESS LINE NO. 2					
Suite 1001					
(16) CITY			(17) STATE	(18) ZIP CODE	
Washington		DC	20036		
(19) DAYTIME TELEPHONE NUMBER (inclu 2024524831	de area code)	(20) COUNTRY	CODE (if not in U.S.	A.)	
2024524631	FCC REGISTRATIO	ON NUMBER (FRN) R	EOUIRED		
(21) APPLICANT (FRN)		(22) FCC USE	=		
0025673724					
COMPLETE SECTIO	N C FOR EACH SERVICE, IF	MORE BOXES ARE	NEEDED, USE CON	TINUATION SHEET	
(23A) CALL SIGN/OTHER ID	(24A) PAYMENT TYPE CODE			(25A) QUANTITY	
KGSV	MVV			1	
(26A) FEE DUE FOR (PTC)	(27A) TOTAL FEE		FCC US	FCC USE ONLY	
290.00	290.00				
(28A) FCC CODE I	(29A) FCC CODE 2  BESTA202207				
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CO	DDE	(25B) QU	ANTITY	
(A(D) FFF DUF FOR (BTG)	(ATP) TOTAL FEE		FOCUS	r owy v	
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE		FCCUS	FCC USE ONLY	
(28B)FCC CODE I		(29B) FCC CODE 2	(29B) FCC CODE 2		
	SECTION	 D – CERTIFICATION			
CERTIFICATION STATEMENT					
I,, the best of my knowledge, information and belief	certify under penalty of perjury t	hat the foregoing and su	pporting information i	is true and correct to	
SIGNATURE			DATE		
	SECTION E - CREDIT O	CARD PAYMENT INF	ORMATION		
М	ASTERCARD VISA		<u>.</u>		
ACCOUNT NUMBER EXPIRATION DATE					
I hereby authorize the FCC to charge my credit ca	ard for the service(s)/authorization	on herein described.			
SIGNATURE DATE					



## Commission Registration System (CORES)

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

### **FCC Registration**

 $\underline{FCC} > \underline{FCC} \ Registration > \underline{Manage} \ \underline{Existing} \ FRNs > \underline{FRN} \ Financial > \underline{View/Pay} > Payment \ Confirmation$ 

Logged In As: khuffstickler@wbklaw.com | Logout

#### **Online Payment Confirmation**

Print

#### **Online Payment Confirmation**

Total Amount \$290.00 Payer FRN 0025673724

Payer Name khuffstickler@wbklaw.com

Remittance ID 3881957 Treasury Tracking ID 2715C6CL

Thank you for your payment!

View Form159 Go Back

#### **Customer Service**

<u>Help</u> **Frequently Asked Questions Privacy Statement** FCC Home Page

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