

FEDERAL COMMUNICATIONS COMMISSION
REMITTANCE ADVICE

(1) LOCK BOX # 979089		SPECIAL USE ONLY	
FCC USE ONLY			
SECTION A - PAYER INFORMATION			
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card) Genesis Communications of Tampa Bay, Inc.		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) 290.00	
(4) STREET ADDRESS LINE NO.1 PO Box 25434			
(5) STREET ADDRESS LINE NO. 2			
(6) CITY Tampa		(7) STATE FL	(8) ZIP CODE 33622
(9) DAYTIME TELEPHONE NUMBER (include area code) 8132811040		(10) COUNTRY CODE (if not in U.S.A.) US	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(11) PAYER (FRN) 0003778933		(12) FCC USE ONLY	
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			
(13) APPLICANT NAME Genesis Communications of Tampa Bay, Inc.			
(14) STREET ADDRESS LINE NO.1 PO Box 25434			
(15) STREET ADDRESS LINE NO. 2			
(16) CITY Tampa		(17) STATE FL	(18) ZIP CODE 33622
(19) DAYTIME TELEPHONE NUMBER (include area code) 8132811040		(20) COUNTRY CODE (if not in U.S.A.) US	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(21) APPLICANT (FRN) 0003778933		(22) FCC USE ONLY	
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(23A) CALL SIGN/OTHER ID WHBO	(24A) PAYMENT TYPE CODE MVV	(25A) QUANTITY 1	
(26A) FEE DUE FOR (PTC) 290.00	(27A) TOTAL FEE 290.00	FCC USE ONLY	
(28A) FCC CODE 1 41383		(29A) FCC CODE 2 BESTA20220913AAA	
(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		
SECTION D - CERTIFICATION			
CERTIFICATION STATEMENT			
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 _____	
SECTION E - CREDIT CARD PAYMENT INFORMATION			
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 _____	



FCC Registration



Logged In As: 0003778933 | [Logout](#)

Online Payment Confirmation

Print

Online Payment Information

Total Amount	\$290.00
Payer FRN	0003778933
Payer Name	0003778933
Remittance ID	3920924
Treasury Tracking ID	271M4PLE

Thank you for your payment!

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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).