## FEDERAL COMMUNICATIONS COMMISSION REMITTANCE ADVICE

(I) LOCK BOX #	100			SPECIAL USE ONLY	
979089				FCC USE ONLY	
(2) PAVER NAME (if paying by credit card enter		PAYER INFORMATIO	Control of the second	INT PAID (U.S. Dollars and cents)	
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card)  ROGER WRIGHT			1,625.00		
(4) STREET ADDRESS LINE NO.1 1212 N. LOCUST AVE.					
(5) STREET ADDRESS LINE NO. 2 PO Box 156					
(6) CITY LAWRENCEBURG			(7) STATE <b>TN</b>	(8) ZIP CODE 38464	
(9) DAYTIME TELEPHONE NUMBER (include 9317622916	(10) COUNTRY	(10) COUNTRY CODE (if not in U.S.A.) US			
		N NUMBER (FRN) REQUIRED			
(11) PAYER (FRN) (12) 1			12) FCC USE ONLY		
0006920771					
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  ROGER W WRIGHT					
(14) STREET ADDRESS LINE NO.1					
1212 N. LOCUST AVE.					
(15) STREET ADDRESS LINE NO. 2					
PO Box 156 (16) CITY (18) ZIP CODE					
(16) CITY LAWRENCEBURG			TN	38464	
(19) DAYTIME TELEPHONE NUMBER (include area code)         (20) COUNTRY CODE (if not in U.S.A.)           9317622916         US					
FCC REGISTRATION NUMBER (FRN) REQUIRED					
(21) APPLICANT (FRN) (22) FCC USE ONLY (20) FCC USE ONLY					
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET  (23A) CALL SIGN/OTHER ID (24A) PAYMENT TYPE CODE (25A) QUANTITY					
wwlx	MVU		1	7 2 7	
(26A) FEE DUE FOR (PTC) 1,625.00	(27A) TOTAL FEE 1,625.00		FCC US	FCC USE ONLY	
(28A) FCC CODE I	(29A) FCC CODE 2 20221026AAE				
(23B) CALL SIGN/OTHER ID (24B) PAYMENT TYPE CODE			(25B) QUANTITY		
(255) CHEE ORING THEK ID			(3.3) (3	,	
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE		FCC US	FCC USE ONLY	
(28B)FCC CODE I (29B) FCC CODE :					
SECTION D - CERTIFICATION					
CERTIFICATION STATEMENT					
I,, c the best of my knowledge, information and belief.	ertify under penalty of perjury the	hat the foregoing and sup	oporting information	is true and correct to	
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					
SEE PUBLIC BURDEN ON REVERSE FCC FORM 159 FEBRUARY 2003(REVISED)					

11/3/22, 10:17 AM about:blank

## **Online Payment Information**

 Total Amount
 \$1,625.00

 Payer FRN
 0006920771

 Payer Name
 0006920771

 Remittance ID
 3966571

 Treasury Tracking ID
 2729MV0R

Thank you for your payment!