

**FEDERAL COMMUNICATIONS COMMISSION
 REMITTANCE ADVICE
 BILL FOR COLLECTION**

Approved by OMB
 3060-0589
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FOR INQUIRIES CALL
 1-202-418-1995
 (Revenue and Receivable Operations Group)

Bill Number	Applicant FRN	Current Bill Date

Application Information:

Payable to:
 Federal Communications Commission

Send a copy of this bill to:
 Federal Communications Commission
 Revenue & Receivables Operations Group
 P.O. Box

Total Amount Due		Due Date
TOTAL AMOUNT DUE MUST BE RECEIVED BY		

Payer FRN No. Please Complete The Payer Information, FCC Registration Number (FRN) is required

Payer Name (if paying by credit card enter name as it appears on the card)

Address Line No. 1

Address Line No. 2

City State Zip Code

Daytime Phone Number (include area code)

Reason For Bill:

Call Sign/Other FCC ID	Payment Type Code	Quantity	Fee Due For (PTC)	Total Fee	FCC Code 1	FCC Code 2

TOTAL DUE 0

Please choose a method of Payment and complete the section if paying by Credit Card

Payment Method:

CREDIT CARD CHECK WIRE IPAC MIPR

MASTERCARD DISCOVER VISA AMEX

ACCOUNT NUMBER _____ EXPIRATION DATE _____

I hereby authorize the FCC to charge my Credit Card for the service(s) / authorization(s) herein described.

AUTHORIZED SIGNATURE _____ DATE _____

**FEDERAL COMMUNICATIONS COMMISSION
 REMITTANCE ADVICE
 BILL FOR COLLECTION
 (Continuation Sheet)**

Bill Number	Applicant FRN	Current Bill Date				
Call Sign/Other FCC ID	Payment Type Code	Quantity	Fee Due For (PTC)	Total Fee	FCC Code 1	FCC Code 2
BALANCE FORWARD				0		