

Annual DTV Ancillary/Supplementary Services Report

Approved by OMB 3060-0906
May 2015

General Information

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* Indicates required field

Application Description

Description of the application (255 characters max.) is visible only to you and is not part of the submitted application. It will be displayed in your Applications workspace.

APPLICATION SECTIONS

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[Applicant Information](#)

[Contact Representatives](#)

[Ancillary/Supplementary Services](#)

[Application Summary](#)

[Certify](#)

Attachments

* Are attachments (other than associated schedules) being filed with this application?

Yes No [Clear](#)

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Technical problems or trouble accessing the system? [Submit Help Request](#) or Contact (877) 480-3201 TTY: (717) 338-2824

Federal Communications Commission
445 12th Street SW
Washington, DC 20554

Phone: 1-888-225-5322
TTY: 1-888-835-5322
Fax: 1-866-418-0232
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FOIA
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Open Government Directive
Plain Writing Act
2009 Recovery and Reinvestment Act

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* indicates required field

[Attachments](#) [Draft Copy](#)

Authorization Holder Name

 Check box if the Authorization Holder name is being updated because of the sale (or transfer of control) of the Authorization(s) to another party and for which proper Commission approval has not been received or proper notification provided.

Applicant Name and Type

* Applicant Type:

* Applicant Type Other:

Doing Business As:

Applicant Contact Information

Attention To:

* Country:

PO Box: *Either PO Box or Address Line 1 is required.*

* Address Line 1:

Address Line 2:

* City:

* State:

* Zip Code:

* Phone:

* Email:

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Contact Type

* Please select the contact type:

- Legal Representative
Technical Representative
Other

Contact Name

Form fields for Contact Name: First Name, Middle Name, Last Name, Suffix, Title, Company Name

Contact Information

Form fields for Contact Information: Attention To, Country, PO Box, Address Line 1, Address Line 2, City, State, Zip Code, Phone, Email

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Save & Add Another

Save & Continue

Annual DTV Ancillary/Supplementary Services Report
Ancillary/Supplementary Services

* indicates required field

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* Ancillary/Supplementary Services Provided. Briefly describe below the service provided; the amount of gross revenues received therefrom and the amount of DTV bitstream used to provide such service.

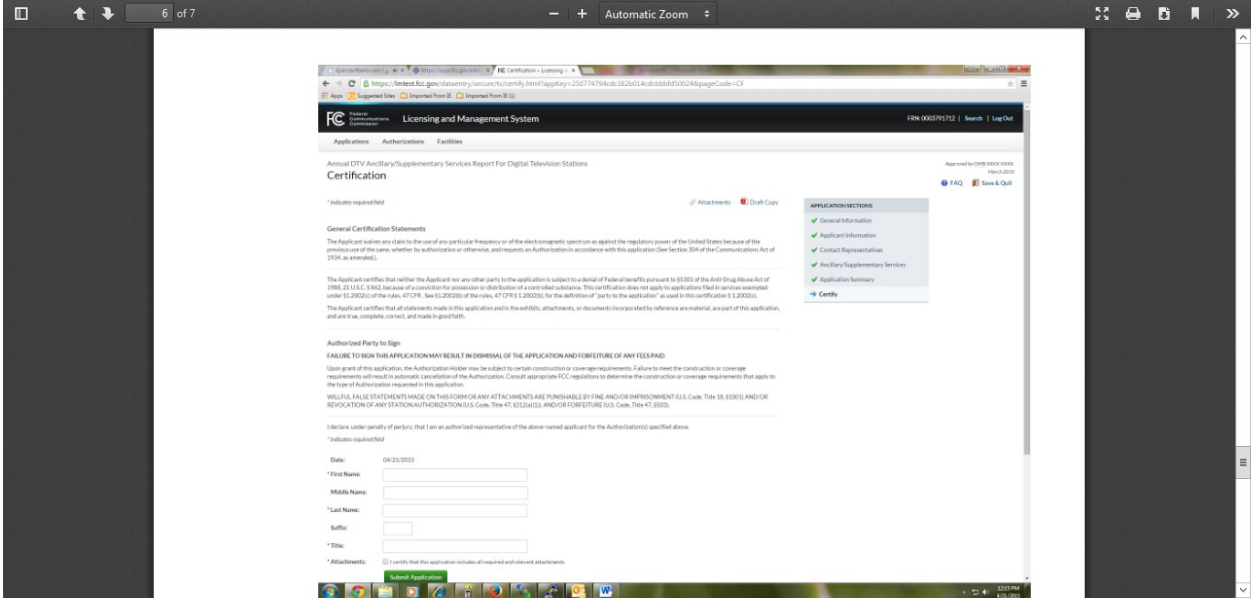
Description of Service	Gross Revenues (\$)	Bitstream Used	Action
<input type="text" value="Testing"/>	<input type="text" value="10000.00"/>	<input type="text" value="2"/> MB/s	
<input type="text" value="testing2"/>	<input type="text" value="5000"/>	<input type="text" value="1"/> MB/s	<input type="button" value="Remove"/>
<input type="button" value="Add Row"/>			

Total amount of gross revenues derived from feeable ancillary or supplementary services: \$60000.00

The Annual DTV Service Fee which is 5 percent of the total of gross Revenue is: \$3000.00

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