

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION  
REMITTANCE ADVICE

(1) LOCK BOX #		SPECIAL USE ONLY	
		FCC USE ONLY	
<b>SECTION A – PAYER INFORMATION</b>			
(2) PAYER NAME <b>S.I.P. Broadcasting Company, Inc</b>		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) <b>380.00</b>	
(4) STREET ADDRESS LINE NO.1 <b>P.O. Box 1450</b>			
(5) STREET ADDRESS LINE NO. 2			
(6) CITY <b>Corbin</b>		(7) STATE <b>KY</b>	(8) ZIP CODE <b>40702</b>
(9) DAYTIME TELEPHONE NUMBER (include area code) <b>6065289600</b>		(10) COUNTRY CODE (if not in U.S.A.) <b>US</b>	
<b>FCC REGISTRATION NUMBER (FRN) REQUIRED</b>			
(11) PAYER (FRN) <b>0001791482</b>		(12) FCC USE ONLY	
<b>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</b>			
(13) APPLICANT NAME <b>S.I.P. Broadcasting Company, Inc</b>			
(14) STREET ADDRESS LINE NO.1 <b>P.O. Box 1450</b>			
(15) STREET ADDRESS LINE NO. 2			
(16) CITY <b>Corbin</b>		(17) STATE <b>KY</b>	(18) ZIP CODE <b>40702</b>
(19) DAYTIME TELEPHONE NUMBER (include area code) <b>6065289600</b>		(20) COUNTRY CODE (if not in U.S.A.) <b>US</b>	
<b>FCC REGISTRATION NUMBER (FRN) REQUIRED</b>			
(21) APPLICANT (FRN) <b>0001791482</b>		(22) FCC USE ONLY	
<b>COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET</b>			
(23A) CALL SIGN/OTHER ID	(24A) PAYMENT TYPE CODE <b>MAR</b>	(25A) QUANTITY <b>1</b>	
(26A) FEE DUE FOR (PTC) <b>95.0</b>	(27A) TOTAL FEE <b>95.00</b>	FCC USE ONLY	
(28A) FCC CODE 1 <b>779530</b>		(29A) FCC CODE 2 <b>LMS0000226321</b>	
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE <b>MAR</b>	(25B) QUANTITY <b>1</b>	
(26B) FEE DUE FOR (PTC) <b>95.0</b>	(27B) TOTAL FEE <b>95.00</b>	FCC USE ONLY	
(28B) FCC CODE 1 <b>779530</b>		(29B) FCC CODE 2 <b>LMS0000226321</b>	
<b>SECTION D – CERTIFICATION</b>			
<b>CERTIFICATION STATEMENT</b>			
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 _____	

FEDERAL COMMUNICATIONS COMMISSION <b>REMITTANCE ADVICE (CONTINUATION SHEET)</b> Page No <u>2</u> of <u>2</u>		SPECIAL USE
		FCC USE ONLY
<b>USE THIS SECTION ONLY FOR EACH ADDITIONAL APPLICANT</b> <b>SECTION BB- ADDITIONAL APPLICANT INFORMATION</b>		
(13) APPLICANT NAME <b>S.I.P. Broadcasting Company, Inc</b>		
(14) STREET ADDRESS LINE NO.1 <b>P.O. Box 1450</b>		
(15) STREET ADDRESS LINE NO. 2		
(16) CITY <b>Corbin</b>	(17) STATE <b>KY</b>	(18) ZIP CODE <b>40702</b>
(19) DAYTIME TELEPHONE NUMBER (include area code) <b>6065289600</b>	(20) COUNTRY CODE (if not in U.S.A.) <b>US</b>	
<b>FCC REGISTRATION NUMBER (FRN) REQUIRED</b>		
(21) APPLICANT (FRN) <b>0001791482</b>	(22) FCC USE ONLY	
<b>COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET</b>		
(23A) CALL SIGN/OTHER ID	(24A) PAYMENT TYPE CODE <b>MAR</b>	(25A) QUANTITY <b>1</b>
(26A) FEE DUE FOR (PTC) <b>95.0</b>	(27A) TOTAL FEE <b>95.00</b>	FCC USE ONLY
(28A) FCC CODE 1 <b>779530</b>	(29A) FCC CODE 2 <b>LMS0000226321</b>	
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE <b>MAR</b>	(25B) QUANTITY <b>1</b>
(26B) FEE DUE FOR (PTC) <b>95.0</b>	(27B) TOTAL FEE <b>95.00</b>	FCC USE ONLY
(28B) FCC CODE 1 <b>779530</b>	(29B) FCC CODE 2 <b>LMS0000226321</b>	
(23C) CALL SIGN/OTHER ID	(24C) PAYMENT TYPE CODE	(25C) QUANTITY
(26C) FEE DUE FOR (PTC)	(27C) TOTAL FEE	FCC USE ONLY
(28C) FCC CODE 1	(29C) FCC CODE 2	
(23D) CALL SIGN/OTHER ID	(24D) PAYMENT TYPE CODE	(25D) QUANTITY
(26D) FEE DUE FOR (PTC)	(27D) TOTAL FEE	FCC USE ONLY
(28D) FCC CODE 1	(29D) FCC CODE 2	
(23E) CALL SIGN/OTHER ID	(24E) PAYMENT TYPE CODE	(25E) QUANTITY
(26E) FEE DUE FOR (PTC)	(27E) TOTAL FEE	FCC USE ONLY
(28E) FCC CODE 1	(29E) FCC CODE 2	
(23F) CALL SIGN/OTHER ID	(24F) PAYMENT TYPE CODE	(25F) QUANTITY
(26F) FEE DUE FOR (PTC)	(27F) TOTAL FEE	FCC USE ONLY
(28F) FCC CODE 1	(29F) FCC CODE 2	