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Postage	\$.63
Certified Fee	4.35
Return Receipt Fee (endorsement Required)	3.55
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Total Postage & Fees	\$ 8.53
Postmark Here	OCT 25 2023
Postmark Here	62959
Int To	Niagara Rehabilitation-Nursing
Dest. Apt. No.	322 Cedar Ave
PO Box No.	Niagara Falls, NY 14301
State, ZIP+	
3800, August 2006	See Reverse for Instructions

il Engineer

INSTRUCTION AND INITIATION OF RF OPERATIONS – WNYB (DRT)
Channel 27 – 548 to 554 MHz)

OPERATION. THE RESPONSIBLE PARTY FOR OVERSEEING AND/OR
MAINTAINING CLINICAL OR BIOMEDICAL ENGINEERING EQUIPMENT AT THIS FACILITY MUST RECEIVE
THIS LETTER.

Dear Administrator or Biomedical Engineer,

Radiant Life Ministries, Inc. wishes to notify you of the impending construction of a new UHF digital replacement translator facility for the full power television station WNYB in your area. We are notifying you of this change because patients at your facility may use biomedical telemetry devices that operate in the television broadcast band that could potentially be affected when this change takes place.

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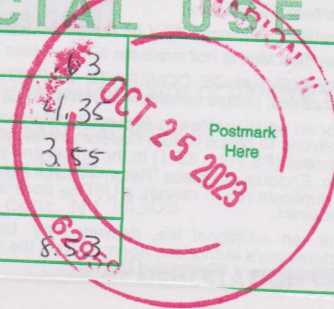
The contact information for the engineering representative in charge WNYB (DRT), along with the commencement date, TV channel and frequency band for the Station is listed on the attached page. Please contact the individual listed on the attached page who is associated with WNYB (DRT) if you wish for more information or want to report anticipated or actual interference problems.

Kind Regards,

Michael J. Daly

Michael Daly, Secretary
Radiant Life Ministries, Inc.

0006 2150 0002 2687 2710

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Postage	\$ 3.03
Certified Fee	21.35
Return Receipt Fee (Endorsement Required)	3.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 28.93
	
Sent To Speciality Medical Services Street, Apt. No., or PO Box No. 1 Colomba Dr #2 City, State, ZIP+4 Niagara Falls, NY 14305	
PS Form 3800, August 2006 See Reverse for Instructions	

Engineer

RUCTION AND INITIATION OF RF OPERATIONS – WNYB (DRT)
Channel 27 – 548 to 554 MHz)

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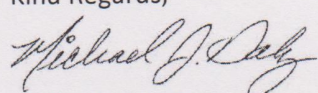
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9292 2892 2000 0572 9007

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 8.53
PS Form 3800, August 2006 See Reverse for Instructions	

Sent To
DeGraff Memorial Hospital
145 Tremont St
North Tonawanda, NY 14120
City, State, ZIP+4

Postmark Here
OCT 25 2023

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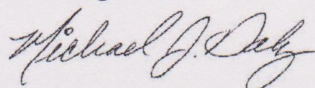
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☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$ 6.30

Total Postage and Fees

\$ 8.53

Sent To

Eden Rehabilitation and Nursing Center

Street and Apt. N2806 George St

Eden, NY 14057

City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

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Certified Mail Fee

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Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$ 1.63

Total Postage and Fees

\$ 8.53

Sent To

Ambulatory Surgery Center of Western New York

Street and Apt. 945 Sweet Home Rd

Buffalo, NY 14226

City, State, ZIP+

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark

OCT 25 2023

62958

Engineer
New York

RUCTION AND INITIATION OF RF OPERATIONS – WNYB (DRT)
channel 27 – 548 to 554 MHz)

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7017 2400 0001 0626 3224

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\$ 4.35

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$ 3.55

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$ 63

Total Postage and Fees

\$ 8.53

Sent To

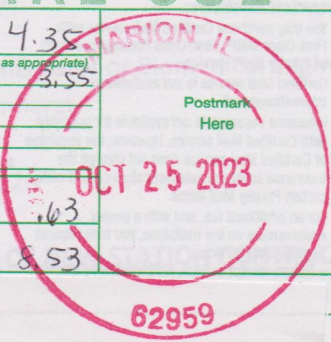
Street and Apt. Elderwood at Amherst

4459 Bailey Ave

City, State, ZIP+4® Amherst, NY 14226

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



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ION AND INITIATION OF RF OPERATIONS – WNYB (DRT)
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Certified Mail Fee

\$ 4.35

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$ 0.55

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$ 1.63

Total Postage and Fees

\$ 8.53

Sent To

Horizon Health Services: Union Losson Recovery Center

2563 Union Rd

Cheektowaga, NY 14227

City, State, ZIP

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Engineer
Recovery Center

REDUCTION AND INITIATION OF RF OPERATIONS – WNYB (DRT)
Channel 27 – 548 to 554 MHz)

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Postage	\$ 6.3
Certified Fee	4.35
Return Receipt Fee (Endorsement Required)	3.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 8.53

Sent To
Ellicott Center
Street, Apt. No. 200 Seventh St
or PO Box No. 3
Buffalo, NY 14201
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

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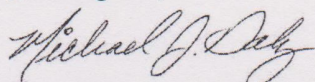
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7017 2400 0001 0828 3243

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 1.65
Total Postage and Fees	\$ 8.53
Sent To	
Street and Apt.	Roswell Park Comprehensive Cancer Center 665 Elm St
City, State, ZIP	Buffalo, NY 14203

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Engineer
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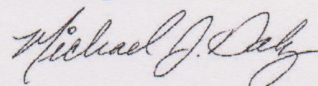
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