Approved by OMB 3060-0065 Expires 12/31/95

SECTION I

APPLICANT NAME (Last, first, middle initial)
Kinman, Chris Y.

22300 Comsat Drive

FEDERAL COMMUNICATIONS COMMISSION FCC FORM 442

| FOR FCC | C/MELLON | FEB | 15 | 1995 |
|--------------------|----------|-----|-------------|------|
| FCC USE ONLY | | | | , |

APPLICATION FOR NEW OR MODIFIED RADIO STATION AUTHORIZATION UNDER PART 5 OF FCC RULES - EXPERIMENTAL RADIO SERVICE (OTHER THAN BROADCAST)

MAILING ADDRESS (Line 1) (Maximum 85 characters - refer to Instruction (2) on reverse of form)

| MAILING ADDRESS (Line 2 | Oth reduien (Nexumum s | o Characters) | | • |
|---------------------------------|--|---------------------------------------|---------------------------|-------------------------------|
| CITY Clarksburg | 3 | J | | |
| STATE OR COUNTRY (If for | eign address) ZIP CODE | CA | LL SIGN OR OTHER | PCC IDENTIFIER (If applicable |
| MD | 2087: | ı | | |
| inter in Column (A) the corre | oct Fee Type Code for the s | ervice you are apply | ing for. Fee Type (| Codes may be found in FCC |
| | lumn (B) the Fee Multiple, if | | | ult obtained from multiplying |
| ne value of the ree type Co (A) | de in Column (A) by the num (B) | | mm (b), ir any. (C) | • |
| FEE TYPE CODE | FEE MULTIPLE (If required) | 1 | COLUMN (A) | |
| E A E | | \$ 45.00 | | |
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| ECTION II | To be used only where the requirement to list need to be used only with the requirement to list need to be used only with the requirement. | • | _ | ns which result in a |
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| (A) | (B) | · · · · · · · · · · · · · · · · · · · | (C) | FOR FCC USE ONLY |
| FEE TYPE CODE | FEE MULTIPLE (if required) | | OR FEE TYPE COLUMN (A) | |
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| D ALL AMOUNTS SHOWN | ••• | TOTAL AND | UNT REMITTED | |
| ROUGH (5), AND ENTER TH | e ivial mene. | WITH THIS | APPLICATION | FOR FCC USE ONLY |

\$45.00

REMITTANCE.