

UNPAID FEE BILLING REQUEST

INSTRUCTIONS: Use this form to request billing of an individual or organization for an unpaid fee. Use a separate form for each unpaid fee. Complete all required blocks. Billing requests must be prepared and forwarded for processing within 24 hours. Numbers in parentheses indicate allowable characters in each data field. Forward completed billing requests to: Fee Section, Room 452, 1919 M Street, N.W., Washington, D.C. 20554.

Date: 06/07/2001

Account Number:

| FY | FEE TYPE CODE | | | SEQUENTIAL | | | |
|----|---------------|---|---|------------|---|---|-------|
| 01 | E | A | E | O | E | T | 10 01 |

Amount To Be Billed:

\$100.00

Enter the last digit of the current fiscal year in the first block above. Enter the applicable three character Fee Type Code next (with appropriate suffix) followed by a Bureau/Office assigned unique sequential number.

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|--|-------------------------|-------------------------------|
| Name: (First, Last) (32) Winstar Wireless, Inc. (deptor-in-possession) | | |
| Address Line 1: (32) 1615 L Street, NW, Suite 1260 | | |
| Address Line 2: (32) | | |
| City: (21) Washington | State: (2) DC | ZIP Code: (9) 20036 |
| Country, if not USA: | | |
| Special Instructions (Optional): | | |
| (for 47-EX-AL-2001, WB2XIB and 48-EX-AL-2001, WC2XJS) | | |
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PREPARED BY:

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| Name: Carl Huie | | |
| Room Number: 7-A361 | Building: Portals | Telephone Number: (202) 418-2430 |

APPROVAL:

| | |
|-------------------------------------|-------------------------|
| Bureau/Office Signature: | Date: 6/12/01 |
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**FOR FEE SECTION
USE ONLY**

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