

READ INSTRUCTIONS CAREFULLY
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION
REMITTANCE ADVICE

Approved by OMB
3060-0589
Page No 1 of 2

(1) LOCKBOX #

SPECIAL USE

FCC USE ONLY

SECTION A - PAYER INFORMATION

(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card)

LEWELLEN, TENA C.

(3) TOTAL AMOUNT PAID (U.S. Dollars and cents)

\$180.00

(4) STREET ADDRESS LINE NO. 1

LEWELLEN ARCTIC RESEARCH, Inc.

(5) STREET ADDRESS LINE NO. 2

P.O. BOX 2089

(6) CITY

Palmer

(7) STATE

Alaska

(8) ZIP CODE

99645-2089

(9) DAYTIME TELEPHONE NUMBER (include area code)

(907) 745-3184

(10) COUNTRY CODE (if not in U.S.A.)

FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED

(11) PAYER (FRN)

(12) PAYER (TIN)

92-0177153

IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C)

(13) APPLICANT NAME

(14) STREET ADDRESS LINE NO. 1

(15) STREET ADDRESS LINE NO. 2

(16) CITY

(17) STATE

(18) ZIP CODE

(19) DAYTIME TELEPHONE NUMBER (include area code)

(20) COUNTRY CODE (if not in U.S.A.)

FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED

(21) APPLICANT (FRN)

(22) APPLICANT (TIN)

92-0177153

COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET

(23A) CALL SIGN/OTHER ID

ARGOS 10459

(24A) PAYMENT TYPE CODE

EAE

(25A) QUANTITY

1

(26A) FEE DUE FOR (PTC)

45.00

(27A) TOTAL FEE

45.00

FCC USE ONLY

(28A) FCC CODE 1

(29A) FCC CODE 2

(23B) CALL SIGN/OTHER ID

ARGOS 10453

(24B) PAYMENT TYPE CODE

EAE

(25B) QUANTITY

1

(26B) FEE DUE FOR (PTC)

45.00

(27B) TOTAL FEE

45.00

FCC USE ONLY

(28B) FCC CODE 1

(29B) FCC CODE 2

SECTION D - CERTIFICATION

(30) CERTIFICATION STATEMENT

I, TENA C. LEWELLEN, 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

Tena C. Lewellen

DATE 15 Oct. 2001

SECTION E - CREDIT CARD PAYMENT INFORMATION

(31)

MASTERCARD/VISA ACCOUNT NUMBER:



MASTERCARD

EXPIRATION
DATE:



VISA

I hereby authorize the FCC to charge my VISA or MASTERCARD for the service(s)/authorization herein described.

SIGNATURE

DATE

SPECIAL USE

FCC USE ONLY

USE THIS SECTION ONLY FOR EACH ADDITIONAL APPLICANT

SECTION BB - ADDITIONAL APPLICANT INFORMATION

(13) APPLICANT NAME

LEWELLEN, TENA C.

(14) STREET ADDRESS LINE NO. 1

LEWELLEN ARCTIC RESEARCH, Inc.

(15) STREET ADDRESS LINE NO. 2

P.O. BOX 2089

(16) CITY

PALMER

(17) STATE

ALASKA

(18) ZIP CODE

99645-2089

(19) DAYTIME TELEPHONE NUMBER (include area code)

(907) 745-3184

(20) COUNTRY CODE (if not in U.S.A.)

FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED

(21) APPLICANT (FRN)

(22) APPLICANT (TIN)

92-0177153

IF MORE BOXES ARE NEEDED, USE ADDITIONAL FCC 159-C CONTINUATION SHEETS TO LIST EACH SERVICE

SECTION CC - PAYMENT INFORMATION

(23A) CALL SIGN/OTHER ID

ARGOS 10446

(24A) PAYMENT TYPE CODE

EAE

(25A) QUANTITY

1

(26A) FEE DUE FOR (PTC)

45.00

(27A) TOTAL FEE

45.00

FCC USE ONLY

(28A) FCC CODE 1

(29A) FCC CODE 2

(23B) CALL SIGN/OTHER ID

ARGOS 10447

(24B) PAYMENT TYPE CODE

EAE

(25B) QUANTITY

1

(26B) FEE DUE FOR (PTC)

45.00

(27B) TOTAL FEE

45.00

FCC USE ONLY

(28B) FCC CODE 1

(29B) FCC CODE 2

(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

FCC FORM 442

FOR
FCC
USE
ONLY

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

SECTION I

APPLICANT NAME (Last, first, middle initial)

LEWELLEN, TENA C.

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

LEWELLEN ARCTIC RESEARCH, INC.

MAILING ADDRESS (Line 2) (if required) (Maximum 85 characters)

P.O. BOX 2089

CITY

PALMER

STATE OR COUNTRY (if foreign address)

ALASKA

ZIP CODE

99645

CALL SIGN OR FILE NUMBER

Enter in Column (A) the correct Fee Type Code for the service you are applying for. Fee Type Codes may be found in FCC Fee Filing Guides. Enter in Column (B) the Fee Multiple, if applicable. Enter in Column (C) the result obtained from multiplying the value of the Fee Type Code in Column (A) by the number entered in Column (B), if any.

(A)

FEE TYPE CODE

E A E

(B)

FEE MULTIPLE
(if required)

4

(C)

FEE DUE FOR FEE TYPE
CODE IN COLUMN (A)

\$ 180.00

FOR FCC USE ONLY

SECTION II

— To be used only when you are requesting concurrent actions which result in a requirement to list more than one Fee Type Code.

(A)

FEE TYPE CODE

(B)

FEE MULTIPLE
(if required)

(C)

FEE DUE FOR FEE TYPE
CODE IN COLUMN (A)

FOR FCC USE ONLY

(2)

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\$	
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(3)

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\$	
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(4)

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\$	
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(5)

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\$	
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ADD ALL AMOUNTS SHOWN IN COLUMN C, LINES (1) THROUGH (5), AND ENTER THE TOTAL HERE.
THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED REMITTANCE.

TOTAL AMOUNT REMITTED
WITH THIS APPLICATION
OR FILING

\$

FOR FCC USE ONLY



Mellon
Bank

11-07-01 0358320 8320132 1 001 26

LEWELLEN ARCTIC RESEARCH, INC. P.O. BOX 2088 907-745-5184 PALMER, AK 99645		511 2001204670 DATE <u>1 November 2001</u>
PAY TO THE ORDER OF	<u>Federal Communications Commission</u>	\$ <u>200.00</u>
<u>two hundred dollars and 00/100</u>		DOLLARS
Wells Fargo Bank Alaska, N.A. Anchorage, Alaska www.wellsfargo.com		
MEMO	<u>FCC Form 442/AR605</u>	<u>Jana Leweller</u>
⑆ 125200057⑆ 2031264670⑆ 0511		⑈0000020000⑈