

Safety & Compliance Consulting
29 Sweetman Lane
West Milford, NJ 07480-2932
Tel/Fax (973) 728-5141

January 19, 2000
QTK2000-F003
731 Confirmation Number EA96539

Federal Communications Commission
Equipment Approval Services
P.O. Box 358315
Pittsburgh, PA 15251-5315

Subject: Original Application for Class B Computing Device Peripheral
FCC ID: MQ4UH400B / USB Hub, Model UH400B Series

Gentlemen:

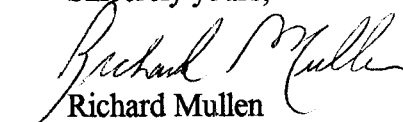
Enclosed, please find AboCom System, Inc's application for equipment authorization dated January 19, 2000. This device is in compliance with Part 15, Subpart B of the FCC Rules.

The subject device is a Universal Serial Bus Hub for connection between host PC and USB plug and play peripheral devices. This device is marketed with such features as: (1) USB controller type M01-UH400-X20 that operates at 6 MHz; (2) one upstream and four downstream USB ports; (3) detachable 1.5m shielded USB interface cable without any ferrite core; and (4) Direct Plug-In AC Adaptor with DC cable without any ferrite core by Dee Van Ent, type DSA-0151A-05A.

This EUT was system tested in accordance with ANSI C63.4-1992 to show compliance with CISPR Pub 22 Class B limits.

Should you have any questions or comments, please contact the undersigned. Thank you for your attention and cooperation in this matter.

Sincerely yours,


Richard Mullen
Manager
Safety & Compliance Consulting

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING (1) LOCKBOX #358315	FEDERAL COMMUNICATIONS COMMISSION REMITTANCE ADVICE PAGE NO <u> </u> / OF <u> </u>	APPROVED BY OMB 3060-058 SPECIAL USE FCC USE ONLY
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SECTION A - Payer Information

(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) Safety and Compliance Consulting	(3) TOTAL AMOUNT PAID (dollars and cents) \$940.00	
(4) STREET ADDRESS LINE NO. 1 29 Sweetman Lane		
(5) STREET ADDRESS LINE NO. 2		
(6) CITY West Milford	(7) STATE NJ	(8) ZIP CODE 07480
(9) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) (973) 728-5141	(10) COUNTRY CODE (IF NOT IN U.S.A.)	

If payer name and the applicant name are different, complete Section B. If more than one applicant, use continuation sheets (Form 159 - C)

SECTION B - Applicant Information

(11) APPLICANT NAME (if paying by credit card, enter name exactly as it appears on your card) Abocom Systems Inc		
(12) STREET ADDRESS LINE NO. 1 1F, No. 21, R & D Road II		
(13) STREET ADDRESS LINE NO. 2 Science Based Industrial Park		
(14) CITY Hsin-Chu	(15) STATE	(16) ZIP CODE 141
(17) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 886 3 578-9090	(18) COUNTRY CODE (IF NOT IN U.S.A.) Taiw	

SECTION C - Payment Information

(19A) FCC Call Sign/Other ID	(20A) Payment Type Code(PTC) EGC	(21A) Quantity 1	(22A) Fee Due for (PTC) in Block 20A \$940.00	FCC Use Only
(23A) FCC CODE 1 MQ4UH400B		(24A) FCC CODE 2 13EA96539		
(19B) FCC Call Sign/Other ID	(20B) Payment Type Code(PTC)	(21B) Quantity	(22B) Fee Due for (PTC) in Block 20B	FCC Use Only
(23B) FCC CODE 1		(24B) FCC CODE 2		
(19C) FCC Call Sign/Other ID	(20C) Payment Type Code(PTC)	(21C) Quantity	(22C) Fee Due for (PTC) in Block 20C	FCC Use Only
(23C) FCC CODE 1		(24C) FCC CODE 2		
(19D) FCC Call Sign/Other ID	(20D) Payment Type Code(PTC)	(21D) Quantity	(22D) Fee Due for (PTC) in Block 20D	FCC Use Only
(23D) FCC CODE 1		(24D) FCC CODE 2		

SECTION D - Taxpayer Information (Required)

(25) PAYER TIN 0152403353	(26) Complete this block only if applicant name in B-11 is different from payer name in A-2 APPLICANT TIN 0
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SECTION E - Certification

(27) CERTIFICATION STATEMENT
 I, **Richard Mullen / S&CC**, certify under penalty of perjury that the foregoing and supporting information (PRINT NAME)
 are true and correct to the best of my knowledge, information, and belief. SIGNATURE

SECTION F - Credit Card Payment Information

QTK 2000 - F003
Richard Mullen, Manager
Safety & Compliance Consulting
29 Sweetman Lane
West Milford, NJ 07480-2932

(28)	MASTERCARD/VISA ACCOUNT NUMBER:	EXPIRATION DATE:																											
<input type="checkbox"/> MASTERCARD	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>																						<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> MONTH YEAR						
<input type="checkbox"/> VISA	I hereby authorize the FCC to charge my VISA or MASTERCARD for the service(s)/authorization(s) herein described.----->	AUTHORIZED SIGNATURE	DATE																										

FCC FORM 159 JULY 1997 (REVISED)



第一商業銀行
FIRST COMMERCIAL BANK

TAIWAN, REPUBLIC OF CHINA

OUR REF. NO.

T9NN197131 Pay against this check

CHECK NO. 268128830

CLIENT NO. 85014 10-86 220

Date USD940.00
DEC. 14. 1999

FEDERAL COMMUNICATIONS COMMISSION

To

Or Order

The Sum of U.S. DOLLAR NINE HUNDRED AND FORTY ONLY.

TO CITIBANK (NEW YORK STATE):
BUFFALO, NEW YORK, U.S.A.

Chin-Fen Lin
AUTHORIZED SIGNATURE
Chin-Fen Lin
99 8 50 14

Rong-Shan Wu
DRAWER: FIRST COMMERCIAL BANK, TAIWAN
Rong-Shan Wu

⑈ 268128830 ⑈ ⑆ 022000868 ⑆

GTK2000-F003 / FCC ID: MQ44H400B