

ATTIONS CAREFULLY
READING

Streamlined
FEDERAL COMMUNICATIONS COMMISSION
TELEPHONE SATELLITE MOBILE SERVICES, INC.
REMITTANCE ADVICE

ITC-214-20010529-00341

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X #

SECTION A - PAYER INFORMATION

(E) (if paying by credit card, enter name exactly as it appears on your card)
Change Rogers & Wells LLP

(3) TOTAL AMOUNT PAID (U.S. Dollars and cents)
\$815.00

ADDRESS LINE NO. 1
Street, NW
ADDRESS LINE NO. 2

PAID BY CREDIT CARD

JUN - 4 2001

RECEIVED

TELEPHONE NUMBER (include area code)
5000

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

(7) STATE DC
(8) ZIP CODE 20006

Telecom Division
International Bureau

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

(12) PAYER (TIN)
13-5553664

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

PAYER NAME
Satellite Mobile Services, Inc.

ADDRESS LINE NO. 1
Cockerman Street
ADDRESS LINE NO. 2

(17) STATE
(18) ZIP CODE
DC 19901

TELEPHONE NUMBER (include area code)
5000

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

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

(22) APPLICANT (TIN)
51-0408963

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

OTHER ID
Exhibit I

(24A) PAYMENT TYPE CODE
CUT

(25A) QUANTITY
1

DR (PTC)
\$815.00

(27A) TOTAL FEE

FCC USE ONLY
\$815.00

1

(29A) FCC CODE 2

OTHER ID
PAYMENT TYPE CODE

(24B) PAYMENT TYPE CODE

(25B) QUANTITY

DR (PTC)
1

(27B) TOTAL FEE

FCC USE ONLY

1

(29B) FCC CODE 2

SECTION D - CERTIFICATION

ION STATEMENT
Kleinfeld

I, 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

[Signature]

DATE May 29, 2001

SECTION E - CREDIT CARD PAYMENT INFORMATION