

FEDERAL COMMUNICATIONS COMMISSION
REMITTANCE ADVICE
FORM 159

(1) LOCKBOX #		SPECIAL USE ONLY	
		FCC USE ONLY	
SECTION A - PAYER INFORMATION			
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card) TeleCommunication Systems, Inc.		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) \$175.00	
(4) STREET ADDRESS LINE NO. 1 275 West Street			
(5) STREET ADDRESS LINE NO. 2			
(6) CITY Annapolis		(7) STATE MD	(8) ZIP CODE 21401
(9) DAYTIME TELEPHONE NUMBER (include area code) 410-349-7097		(10) COUNTRY CODE (if not in U.S.A.)	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(11) PAYER (FRN) 0005049846		(12) FCC USE ONLY	
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) COMPLETE SECTION BELOW FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(13) APPLICANT NAME TeleCommunication Systems, Inc.			
(14) STREET ADDRESS LINE NO. 1 275 West Street			
(15) STREET ADDRESS LINE NO. 2			
(16) CITY Annapolis		(17) STATE MD	(18) ZIP CODE 21401
(19) DAYTIME TELEPHONE NUMBER (include area code) 410-349-7097		(20) COUNTRY CODE (if not in U.S.A.)	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(21) APPLICANT (FRN) 0005049846		(22) FCC USE ONLY	
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(23A) CALL SIGN/OTHER ID E0060261	(24A) PAYMENT TYPE CODE CGV	(25A) QUANTITY 1	
(26A) FEE DUE FOR (PTC) \$175.00	(27A) TOTAL FEE \$175.00	FCC USE ONLY	
(28A) FCC CODE 1		(29A) FCC CODE 2	
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE	(25B) QUANTITY 1	
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE	FCC USE ONLY	
(28B) FCC CODE 1		(29B) FCC CODE 2	
SECTION D - CERTIFICATION			
CERTIFICATION STATEMENT			
I, <u>Kim ROBERT Seovill</u> , 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 <u>Kim Robert Seovill</u>		DATE <u>11/24/09</u>	
SECTION E - CREDIT CARD PAYMENT INFORMATION			
MASTERCARD _____ VISA _____ AMEX <input checked="" type="checkbox"/> DISCOVER _____			
ACCOUNT NUMBER <u>3794 8956 9411 000</u>		EXPIRATION DATE <u>07/14</u>	
I hereby authorize the FCC to charge my credit card for the service(s)/authorization herein described.			
SIGNATURE <u>Kim Robert Seovill</u>		DATE <u>11/24/09</u>	