

READ INSTRUCTIONS CAREFULLY  
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION  
**REMITTANCE ADVICE**  
FORM 159

Approved by OMB  
3060-0589  
Page No 1 of 2

(1) LOCKBOX# <b>979097</b>	<b>SPECIAL USE ONLY</b>	
<b>FCC USE ONLY</b>		
<b>SECTION A - PAYER INFORMATION</b>		
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card) <b>BFMTV</b>	(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) <b>\$175.00</b>	
(4) STREET ADDRESS LINE NO. 1 <b>12 RUE D'ORADOUR SUR GLANE</b>		
(5) STREET ADDRESS LINE NO. 2		
(6) CITY <b>PARIS</b>	(7) STATE	(8) ZIP CODE <b>75015</b>
(9) DAYTIME TELEPHONE NUMBER (include area code) <b>+33171193470</b>	(10) COUNTRY CODE (if not in U.S.A.) <b>FR</b>	
<b>FCC REGISTRATION NUMBER (FRN) REQUIRED</b>		
(11) PAYER (FRN) <b>0020995072</b>	(12) FCC USE ONLY	
<b>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</b>		
(13) APPLICANT NAME <b>BFMTV</b>		
(14) STREET ADDRESS LINE NO. 1 <b>12 RUE D'ORADOUR SUR GLANE</b>		
(15) STREET ADDRESS LINE NO. 2		
(16) CITY <b>PARIS</b>	(17) STATE	(18) ZIP CODE <b>75015</b>
(19) DAYTIME TELEPHONE NUMBER (include area code) <b>+33171193470</b>	(20) COUNTRY CODE (if not in U.S.A.) <b>FR</b>	
<b>FCC REGISTRATION NUMBER (FRN) REQUIRED</b>		
(21) APPLICANT (FRN) <b>0020995072</b>	(22) FCC USE ONLY	
<b>COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET</b>		
(23A) CALL SIGN/OTHER ID	(24A) PAYMENT TYPE CODE <b>PAOM</b>	(25A) QUANTITY <b>1</b>
(26A) FEE DUE FOR (PTC)	(27A) TOTAL FEE <b>\$175.00</b>	<b>FCC USE ONLY</b>
(28A) FCC CODE 1	(29A) FCC CODE 2	
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE	(25B) QUANTITY
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE	<b>FCC USE ONLY</b>
(28B) FCC CODE 1	(29B) FCC CODE 2	
<b>SECTION D - CERTIFICATION</b>		
<b>CERTIFICATION STATEMENT</b> I, <u>Thomas JUMEL</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>Thomas JUMEL</u>	DATE <u>10/15/2012</u>	
<b>SECTION E - CREDIT CARD PAYMENT INFORMATION</b>		
MASTERCARD <input checked="" type="checkbox"/> VISA <input type="checkbox"/> AMEX <input type="checkbox"/> DISCOVER <input type="checkbox"/>		
ACCOUNT NUMBER <u>5136-1262-6821-3920</u>	EXPIRATION DATE <u>11/12</u>	
I hereby authorize the FCC to charge my credit card for the service(s)/authorization herein described.		
SIGNATURE <u>Thomas JUMEL</u>	DATE <u>10/15/2012</u>	