NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

To: The Accountant:					laster Saucony										
IO. THE ACC	ountant.						e - Year of Issue- Mo Series of the RC)								
Please issue Order of Payment in favor of for payment of the fees indicated below: Date:															
tor payment															
		NEW REN	F	MOD DUP			H	CO		⊢	MA ROC				
	<u> </u>	LEIN	늗	OTHERS			H	CV MS		H	OTHERS				
				JOILIERS			. ⊔	IVIS		ш	OTTLENS			-	
		Particul	ar:			Particula	ar:			Particula	r:				
Code	Code Description Period Covered: 1 Year				Period Covered:				Period Covered:						
Code	Description	No. of	l	No. of	I _	No. of	L	No. of	_	No. of	l	No. of	_	SUB- TOTAL	
		Years	%	Units	Fees	Years	%	Units	Fees	Years	%	Units	Fees		
	FOR LICENSES														
4-02-01-010	Permit to Purchase		_											0.00	
	Filing Fee		-											0.00	
	Permit to Possess/Storage	-												0.00	
4-02-01-010	Construction Permit Fee Radio Station License					_								0.00	
	Inspection Fee													0.00	
	Spectrum User's Fee (SUF)													0.00	
	Fines/Penalties/Surcharges													0.00	
4-02-01-140	Radio Station License Spectrum User's Fee (SUF)														
	FOR PERMITS														
4-02-01-010	Permit Fees													0.00	
	Inspection Fee													0.00	
4-02-01-130	Fillling fee													0.00	
4-02-01-140	Fines/Penalties/Surcharges	-				-	_					-		0.00	
	AMATEUR AND ROC	-	-	_		-						 		0.00	
	Radio Station License	-				-						+		0.00	
	Radio operator's Cert Application Fee	-												0.00	
ı	Seminar Fee														
	Fines/Penalties/Surcharges/													0.00	
4-02-01-140	Radio Station License Radio Operator's Cert.														
4-02-01-140 4-02-01-080	Permit to Purchase													0.00	
ОТ	HER APPLICATION														
4-02-01-020	Registration Fee													0.00	
4-02-01-070	Supervision & Regulation													0.00	
4-02-01-040	Fee Verification/Authentication													0.00	
4-02-01-030	Examination Fee	1												0.00	
4-02-01-040	Clearance/Certification Fee													0.00	
4-02-01-060	Modification Fee													0.00	
4 02 01 000	Miscellaneous Income													0.00	
4-02-01-990	(DUPLICATE) Documentary Stamp Tax	-												0.00	
4-02-01-010	(DST)														
	Others (ADMIN FINES)					-								0.00	
	TOTAL	Neter	To be a		h - f	L		TO	DAY	- Albania da				0.00	
		Note:	io be j	paid on or	betore				DAI	_otnerwis	e subjec	t to reass	essment		
For Assessment only Endorsed for Payment															
REMARK/S															
-	ional sheets, if necessary to	show det	tailed co	mputatio	n										
	should be made in CASH, M					AND DRA	FT Paya	ble to N	ГС-13 FAC	BUREAU	OF TREA	SURY,			
3. PLEASE AT	TTACH 1x1 ID PICTURE UPON	APPLICA	ATION FO	OR NEW/R	ENEWA	AL.									
	LIST OF NAMES:														
PLEASE SEE ATTACHED NAMES AT THE BACK															

PREPARED BY:	APPROVED BY:					