69) Is the Assignee or Transferee a foreign government or the representative of any foreign government?	No
70) Is the Assignee or Transferee an alien or the representative of an alien?	No
71) Is the Assignee or Transferee a corporation organized under the laws of any foreign government?	No
72) is the Assignee or Transferee a corporation of which more than one-fifth of the capital stock is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country?	No
73) Is the Assignee or Transferee directly or indirectly controlled by any other corporation of which more than one-fourth of the capital stock is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? If 'Yes', attach exhibit explaining nature and extent of alien or foreign ownership or control.	No

## **Basic Qualification Questions**

74) Has the Assignee or Transferee or any party to this application had any FCC station authorization, license or construction permit revoked or had any application for an initial, modification or renewal of FCC station authorization, license, construction permit denied by the Commission? If 'Yes', attach exhibit explaining circumstances.	No
75) Has the Assignee or Transferee or any party to this application, or any party directly or indirectly controlling the Assignee or Transferee, or any party to this application ever been convicted of a felony by any state or federal court? If 'Yes', attach exhibit explaining circumstances.	No
76) Has any court finally adjudged the Assignee or Transferee, or any party directly or indirectly controlling the Assignee or Transferee guilty of unlawfully monopolizing or attempting unlawfully to monopolize radio communication, directly or indirectly, through control of manufacture or sale of radio apparatus, exclusive traffic arrangement, or any other means or unfair methods of competition? If 'Yes', attach exhibit explaining circumstances.	
77) is the Assignee or Transferee, or any party directly or indirectly controlling the Assignee or Transferee currently a party in any pending matter referred to in the preceding two items? If 'Yes', attach exhibit explaining circumstances.	No

# 78) Race, Ethnicity, Gender of Assignee/Transferee (Optional)

Race:	American Indian or Alaska Native:	Asian:	Black or African-American: Native Hawaiian or Other Pacific Islander: White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:	
Gender:	Female:	Male:	

## **Assignor/Transferor Certification Statements**

transferred until the consent of the required because the transaction	e Federal Communicat is subject to streamline	authorization will not be assigned or that ions Commission has been given, or (2) ted notification procedures for pro forma a pand Order, 13 FCC Rcd. 6293(1998).	that prior Commission consent is not
2) The Assignor or Transferor cer incorporated by reference are ma	rtifies that all statement iterial, are part of this a	s made in this application and in the exhil pplication, and are true, complete, correc	bits, attachments, or in documents t, and made in good faith.
79) Typed or Printed Name of Pa	rty Authorized to Sign	200	
First Name: RICK	MI: D	Last Name: BAILEY	Suffix:
80) Title: VICE PRESIDENT		The state of the s	
Signature: RICK D BAILEY		81) Date: 02/28/02	The state of the s

# Assignee/Transferee Certification Statements

- 1) The Assignee or Transferee certifies either (1) that the authorization will not be assigned or that control of the license will not be transferred until the consent of the Federal Communications Commission has been given, or (2) that prior Commission consent is not required because the transaction is subject to streamlined notification procedures for *pro forma* assignments and transfers by telecommunications carriers See Memorandum Opinion and Order, 13 FCC Rcd. 6293 (1998).
- 2) The Assignee or Transferee waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application.
- 3) The Assignee or Transferee certifies that grant of this application would not cause the Assignee or Transferee to be in violation of any pertinent cross-ownership, attribution, or spectrum cap rule.\*
- \*If the applicant has sought a waiver of any such rule in connection with this application, it may make this certification subject to the outcome of the waiver request.
- 4) The Assignee or Transferee agrees to assume all obligations and abide by all conditions imposed on the Assignor or Transferor under the subject authorization(s), unless the Federal Communications Commission pursuant to a request made herein otherwise allows, except for liability for any act done by, or any right accured by, or any suit or proceeding had or commenced against the Assignor or Transferor prior to this assignment.
- 5) The Assignee or Transferee certifies that all statements made in this application and in the exhibits, attachments, or in documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.
- 6) The Assignee or Transferee certifies that neither it nor any other party to the application is subject to a denial of Federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1998, 21 U.S.C § 862, because of a conviction for possession or distribution of a controlled substance. See Section 1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification.
- 7) The applicant certifies that it either (1) has an updated Form 602 on file with the Commission, (2) is filing an updated Form 602 simultaneously with this application, or (3) is not required to file Form 602 under the Commission's Rules.

### 82) Typed or Printed Name of Party Authorized to Sign

First Name: ARTHUR	MI: R	Last Name: BLOCK	Suffix:
83) Title: OFFICER			
Signature: ARTHUR R BLOCK		84) Date: 02/28/02	
WILLFUL FALSE STATEMENTS MADE ON IMPRISONMENT (U.S. Code, Title 18, Section PERMIT (U.S. Code, Title 47, Section 312(a)	on 1001) AND/OR	REVOCATION OF ANY STATION LIC	ENSE OR CONSTRUCTION

#### Authorizations To Be Assigned or Transferred

85) Call Sign	86) Radio Service	87) Location Number	88) Path Number 89) Lower or Center (Microwave only) Frequency (MHz)	90) Upper Frequency (MHz)	91) Constructed Yes / No
KRB770	AL				Yes
KYY28	AL				Yes
WPNE658	AL				Yes
WNXD585	AL				Yes

FCC Form 603 Schedule A

# Schedule for Assignments of Authorization and Transfers of Control in Auctioned Services

Approved by OMB 3060 - 0800 See instructions for public burden estimate

### Assignments of Authorization

# 1) Assignee Eligibility for Installment Payments (for assignments of authorization only)

Is the Assignee claiming the same category or a smaller category of eligibility for installment payments as the Assignor (as determined by the applicable rules governing the licenses issued to the Assignor)?

If 'Yes', is the Assignee applying for installment payments?

# 2) Gross Revenues and Total Assets Information (if required) (for assignments of authorization only)

Refer to applicable auction rules for method to determine required gross revenues and total assets information

3	Year 1 Gross Revenues			
	(current)	Year 2 Gross Revenues	Year 3 Gross Revenues	Total Assets:
-	the control of the co	وأريبين بالمتعاملات المتعاملات	Control to the Control of the Contro	

#### 3) Certification Statements

## For Assignees Claiming Eligibility as an Entrepreneur Under the General Rule

Assignee certifies that they are eligible to obtain the licenses for which they apply.

# For Assignees Claiming Eligibility as a Publicly Traded Corporation

Assignee certifies that they are eligible to obtain the licenses for which they apply and that they comply with the definition of a Publicly Traded Corporation, as set out in the applicable FCC rules.

#### For Assignees Claiming Eligibility Using a Control Group Structure

Assignee certifies that they are eligible to obtain the licenses for which they apply.

Assignee certifies that the applicant's sole control group member is a pre-existing entity, if applicable.

# For Assignees Claiming Eligibility as a Very Small Business, Very Small Business Consortium, Small Business, or as a Small Business Consortium

Assignee certifies that they are eligible to obtain the licenses for which they apply.

Assignee certifies that the applicant's sole control group member is a pre-existing entity, if applicable.

## For Assignees Claiming Eligibliity as a Rural Telephone Company

Assignee certifies that they meet the definition of a Rural Telephone Company as set out in the applicable FCC rules, and must disclose all parties to agreement(s) to partition licenses won in this auction. See applicable FCC rules.

#### Transfers of Control

### 4) Licensee Eligibility (for transfers of control only)

As a result of transfer of control, must the licensee now claim a larger or higher category of eligibility than was originally declared?

If 'Yes', the new category of eligibility of the licensee is:

### Certification Statement for Transferees

Transferee certifies that the answers provided in Item 4 are true and correct.

#### Attachment List

Attachment Type	Date	Description	Contents
Other	02/19/02	DESCRIPTION OF TRANSACTION/PUBLIC INTEREST STATEMENT	0177282883803619705262057.pdf

READ INSTE	RUCTIONS CARI OCEEDING	EFULLY								Approved by OMB
	-		1		MUNICATIONS		SION			3060-0589
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(6) CITY Washingt						<del></del>	7-11	(7) STATE	(8) ZIP CC	
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(13) APPLICA AT&T CON	NT NAME MCAST COR	PORATIO	N							
(14) STREET	ADDRESS LINE	NO. 1								
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# FEDERAL COMMUNICATIONS COMMISSION

SPECIAL USE	
FCC USE ONLY	

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(13) APPLICANT NAME AT&T COMCAST COR			DDITIONAL APPLI	CANT INFO	DRMATION	
(14) STREET ADDRESS LINE 1500 MARKET STREET	NO. 1	<u> </u>				
(15) STREET ADDRESS LINE				<del></del>		
(16) CITY PHILADELPHIA					(17) STATE	(18) ZIP CODE 19102
(19) DAYTIME TELEPHONE N (215) 981-7535	UMBER (inc	clude area code)	(20) COUNTRY CO	DE (if not in U		19102
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23F) CALL SIGN/OTHER ID	-		(24F) PAYMENT T	YPE CODE	(25F) QUANTITY	2 - 202 - 1 - 200 - 1
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## COLE, RAYWID & BRAVERMAN, L.L.P.

VENDOR

FEDERAL COMMUNICATIONS

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74540

OUR REF. NO.	YOUR INV. NO.	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT TAKEN
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COLE, RAYWID & BRAVERMAN, L.L.P.

1919 PENNSYLVANIA AVE. N.W. WASHINGTON, DC 20006-3458

BANK OF AMERICA 02992 DC 15-120-540 CHECK NO. 74540

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VENDOR NO.

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TO THE ORDER

OF

FEDERAL COMMUNICATIONS

COMMISSION

#074540# #054001204# 002086050069#

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030102

COLE, RAYWID & BRAVERMAN, L.L.P.

03/01/2002

FEDERAL COMMUNICATIONS

200.00

200.00

0.00

1) Application Purpose: Transfer of Control	
2a) If this request is for an Amendment or Withdrawal, enter the File Number of the pending application currently on file with the FCC.	File Number:
2b) File numbers of related pending applications currently on file with the FCC:	

#### Type of Transaction

3a) Is this a pro forma assignment of authorization or transfer of control? No

3b) If the answer to Item 3a is 'Yes', is this a notification of a pro forma transaction being filed under the Commission's forbearance procedures for telecommunications licenses?

4) For assignment of authorization only, is this a partition and/or disaggregation?

5a) Does this filing request a waiver of the Commission rules?

If 'Yes', attach an exhibit providing the rule numbers and explaining circumstances. No

5b) If a feeable waiver request is attached, multiply the number of stations (call signs) times the number of rule sections and enter the result.

6) Are attachments being filed with this application? Yes

7a) Does the transaction that is the subject of this application also involve transfer or assignment of other wireless licenses held by the assignor/transferor or affiliates of the assignor/transferor(e.g., parents, subsidiaries, or commonly controlled entities) that are not included on this form and for which Commission approval is required? **Yes** 

7b) Does the transaction that is the subject of this application also involve transfer or assignment of non-wireless licenses that are not included on this form and for which Commission approval is required? **Yes** 

#### **Transaction Information**

8) How will assignment of authorization or transfer of control be accomplished? Sale or other assignment or transfer of stock If required by applicable rule, attach as an exhibit a statement on how control is to be assigned or transferred, along with copies of any pertinent contracts, agreements, instruments, certified copies of Court Orders, etc.

9) The assignment of authorization or transfer of control of license is: Voluntary

#### Licensee/Assignor Information

10a) Taxpayer Identification Number	: 841358789	10b) SGIN: 000	10c) FCC Registration Number (FRN): 0001604875	
11) First Name (if individual):	MI:	Last Name:	Suffix:	
12) Entity Name (if not an individual)	TCI CABLE PA	RTNERS OF ST. LC	OUIS, L.P.	
13) Attention To: STEPHEN FLESS	NER			
14) P.O. Box: 5630	And / Or	15) Street Address:		
16) City: DENVER		17) State: CO 18) Zip: 80217		
19) Telephone Number: (720)267-27	00	20) FAX:		
21) E-Mail Address:				

# 22) Race, Ethnicity, Gender of Assignor/Licensee (Optional)

Kace.	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:			
Gender:	Female:	Male:			

# Transferor Information (for transfers of control only)

23a) Taxpayer Identification Number:		23b) SGIN:	23c) FCC Registration Number (FRN): 0003470556
24) First Name (if individual): MI:		Last Name:	Suffix:
25) Entity Name (if not an individu	al): AT&T COF	RP.	
26) P.O. Box:	And / Or	27) Street Address: 32 AVENUE OF THE AMERICAS	
28) City: <b>NEW YORK</b>		29) State: NY	30) Zip: 10013
31) Telephone Number: (212)387	-4000	32) FAX:	
33) E-Mail Address:	······································		

# Name of Transferor Contact Representative (if other than Transferor) (for transfers of control only)

34) First Name: STEVEN	MI:	Last Name: HORVITZ	Suffix:
35) Company Name: COLE, F	RAYWID & BRA	VERMAN, LLP	
36) P.O. Box:	And / Or	37) Street Address: 1919 PENNSYI	LVANIA AVENUE, N.W., SUITE 200
38) City: WASHINGTON		39) State: DC	40) Zip: 20006
41) Telephone Number: (202)	659-9750	42) FAX:	
43) E-Mail Address:			

### Assignee/Transferee Information

45a) Taxpayer Identification Numbe	r: 270000798	45b) SGIN: 000	45c) FCC Registration Number (FRN): 0006329247
46) First Name (if individual):	MI:	Last Name:	Suffix:
47) Entity Name (if other than indivi	dual): AT&T COM	CAST CORPORAT	ION
48) Name of Real Party in Interest:			49) TIN:
50) Attention To: THOMAS R. NATI	HAN		
51) P.O. Box:	And / Or 52) Street Address: 1500 MARKET STREET		ss: 1500 MARKET STREET
53) City: PHILADELPHIA 54		54) State: PA	55) Zip: <b>19102</b>
56) Telephone Number: <b>(215)981-7535</b> 5:		57) FAX:	
58) E-Mail Address:		<del></del>	· · · · · · · · · · · · · · · · · · ·

# Name of Assignee/Transferee Contact Representative (if other than Assignee/Transferee)

			1 A 1 A 1
59) First Name: <b>RENEE</b>	MI:	Last Name: CALLAHAN	Suffix:
60) Company Name: LAWLER,	METZGER & MILKN	IAN, LLC	
61) P.O. Box: And / Or		62) Street Address: 1909 K STREE	T, NW, SUITE 820
63) City: WASHINGTON		64) State: DC	65) Zip: <b>20006</b>
66) Telephone Number: (202)777-7700		67) FAX:	
68) E-Mail Address:			
····			

## **Alien Ownership Questions**

69) Is the Assignee or Transferee a foreign government or the representative of any foreign government?	No
70) Is the Assignee or Transferee an alien or the representative of an alien?	No
71) Is the Assignee or Transferee a corporation organized under the laws of any foreign government?	No
72) Is the Assignee or Transferee a corporation of which more than one-fifth of the capital stock is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country?	No
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74) Has the Assignee or Transferee or any party to this application had any FCC station authorization, license or construction permit revoked or had any application for an initial, modification or renewal of FCC station authorization, license, construction permit denied by the Commission? If 'Yes', attach exhibit explaining circumstances.	No
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Race:	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:			
Gender:	Female:	Male:			

# **Assignor/Transferor Certification Statements**

transferred until the consent of the required because the transaction	e Federal Communicat is subject to streamline	authorization will not be assigned or that ions Commission has been given, or (2) and notification procedures for <i>pro forma</i> and and Order, 13 FCC Rcd. 6293(1998).	that prior Commission consent is not	
The Assignor or Transferor ce incorporated by reference are managed.	rtifies that all statement aterial, are part of this a	s made in this application and in the exhi pplication, and are true, complete, correc	bits, attachments, or in documents t, and made in good faith.	
79) Typed or Printed Name of Pa	rty Authorized to Sign			
First Name: RICK	MI: D	Last Name: BAILEY	Suffix:	
80) Title: VICE PRESIDENT		•		
Signature: RICK D BAILEY 81) Date: 02/19/02				

# Assignee/Transferee Certification Statements \*

- 1) The Assignee or Transferee certifies either (1) that the authorization will not be assigned or that control of the license will not be transferred until the consent of the Federal Communications Commission has been given, or (2) that prior Commission consent is not required because the transaction is subject to streamlined notification procedures for pro forma assignments and transfers by telecommunications carriers See Memorandum Opinion and Order, 13 FCC Rcd. 6293 (1998).
- 2) The Assignee or Transferee waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application.
- 3) The Assignee or Transferee certifies that grant of this application would not cause the Assignee or Transferee to be in violation of any pertinent cross-ownership, attribution, or spectrum cap rule.\*

\*If the applicant has sought a waiver of any such rule in connection with this application, it may make this certification subject to the outcome of the waiver request.

- 4) The Assignee or Transferee agrees to assume all obligations and abide by all conditions imposed on the Assignor or Transferor under the subject authorization(s), unless the Federal Communications Commission pursuant to a request made herein otherwise allows, except for liability for any act done by, or any right accured by, or any suit or proceeding had or commenced against the Assignor or Transferor prior to this assignment.
- 5) The Assignee or Transferee certifies that all statements made in this application and in the exhibits, attachments, or in documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.
- 6) The Assignee or Transferee certifies that neither it nor any other party to the application is subject to a denial of Federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1998, 21 U.S.C § 862, because of a conviction for possession or distribution of a controlled substance. See Section 1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification.
- 7) The applicant certifies that it either (1) has an updated Form 602 on file with the Commission, (2) is filing an updated Form 602 simultaneously with this application, or (3) is not required to file Form 602 under the Commission's Rules.

## 82) Typed or Printed Name of Party Authorized to Sign

First Name: ARTHUR	MI: R	Last Name: BLOCK	Suffix:
83) Title: OFFICER			
Signature: ARTHUR R BLOCK		84) Date: 02/19/02	· · · · · · · · · · · · · · · · · · ·
WILLFUL FALSE STATEMENTS MADE IMPRISONMENT (U.S. Code, Title 18, S PERMIT (U.S. Code, Title 47, Section 3	ection 1001) AND/OR I	REVOCATION OF ANY STATION LIC	CENSE OR CONSTRUCTION

#### Authorizations To Be Assigned or Transferred

85) Call Sign	86) Radio Service		89) Lower or Center Frequency (MHz)	90) Upper Frequency (MHz)	91) Constructed Yes / No
WRM569	AL				Yes
WEC251	AL				Yes

FCC Form 603 Schedule A

# Schedule for Assignments of Authorization and Transfers of Control in Auctioned Services

Approved by OMB 3060 - 0800 See instructions for public burden estimate

## **Assignments of Authorization**

# 1) Assignee Eligibility for Installment Payments (for assignments of authorization only)

Is the Assignee claiming the same category or a smaller category of eligibility for installment payments as the Assignor (as determined by the applicable rules governing the licenses issued to the Assignor)?

If 'Yes', is the Assignee applying for installment payments?

# 2) Gross Revenues and Total Assets Information (if required) (for assignments of authorization only)

Refer to applicable auction rules for method to determine required gross revenues and total assets information

Year 1 Gross Revenues (current)	Year 2 Gross Revenues	Year 3 Gross Revenues	Total Assets:

#### 3) Certification Statements

#### For Assignees Claiming Eligibility as an Entrepreneur Under the General Rule

Assignee certifies that they are eligible to obtain the licenses for which they apply.

## For Assignees Claiming Eligibility as a Publicly Traded Corporation

Assignee certifies that they are eligible to obtain the licenses for which they apply and that they comply with the definition of a Publicly Traded Corporation, as set out in the applicable FCC rules.

## For Assignees Claiming Eligibility Using a Control Group Structure

Assignee certifies that they are eligible to obtain the licenses for which they apply.

Assignee certifies that the applicant's sole control group member is a pre-existing entity, if applicable.

# For Assignees Claiming Eligibility as a Very Small Business, Very Small Business Consortium, Small Business, or as a Small Business Consortium

Assignee certifies that they are eligible to obtain the licenses for which they apply.

Assignee certifies that the applicant's sole control group member is a pre-existing entity, if applicable.

## For Assignees Claiming Eligibility as a Rural Telephone Company

Assignee certifies that they meet the definition of a Rural Telephone Company as set out in the applicable FCC rules, and must disclose all parties to agreement(s) to partition licenses won in this auction. See applicable FCC rules.

#### Transfers of Control

#### 4) Licensee Eligibility (for transfers of control only)

As a result of transfer of control, must the licensee now claim a larger or higher category of eligibility than was originally declared?

if 'Yes', the new category of eligibility of the licensee is:

### Certification Statement for Transferees

Transferee certifies that the answers provided in Item 4 are true and correct.

#### **Attachment List**

Attachment Type	Date	Description	Contents
Other	02/19/02	DESCRIPTION OF TRANSACTION/PUBLIC INTEREST STATEMENT	0177282838521400286625360.pdf

REAL INSTRUCTIONS CAREFULLY STAMP AND REFURN BEFORE PROCEEDING Approved by OMB FEDERAL COMMUNICATIONS COMMISSION 3060-0589 REMITTANCE ADVICE 1 of 1 SPECIAL USE (1) LOCKBOX # 358994 +CU/MALLAN MAR 0 7 2002 FCC USE ONLY **SECTION A - PAYER INFORMATION** (2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) (3) TOTAL AMOUNT PAID (U.S. Dollars and cents) COLE, RAYWID & BRAVERMAN, L.L.P. \$100.00 (4) STREET ADDRESS LINE NO. 1 1919 PENNSYLVANIA AVENUE, NW. (5) STREET ADDRESS LINE NO. 2 SUITE 200 (6) CITY (7) STATE (8) ZIP CODE WASHINGTON DC 20006 (9) DAYTIME TELEPHONE NUMBER (include area code) (10) COUNTRY CODE (if not in U.S.A.) (202) 695-9750 FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED (11) PAYER (FRN) (12) PAYER (TIN) 0003787942 0520820071 IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) (13) APPLICANT NAME AT&T COMCAST CORPORATION (14) STREET ADDRESS LINE NO. 1 1500 MARKET STREET (15) STREET ADDRESS LINE NO. 2 (16) CITY (17) STATE (18) ZIP CODE **PHILADELPHIA** PA 19102 (19) DAYTIME TELEPHONE NUMBER (include area code) (20) COUNTRY CODE (if not in U.S.A.) (215) 981-7535 FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED (21) APPLICANT (FRN) 22) APPLICANT (TIN) 0006329247 0270000798 COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET (23A) CALL SIGN/OTHER ID (24A) PAYMENT TYPE CODE (25A) QUANTITY **WEC251 PATM** (26A) FEE DUE FOR (PTC) 27A) TOTAL FEE FCC USE ONLY \$50.00 \$50.00 (28A) FCC CODE 1 (29A) FCC CODE 2 0000776319 (23B) CALL SIGN/OTHER ID (24B) PAYMENT TYPE CODE (25B) QUANTITY WRM569 **PATM** (26B) FEE DUE FOR (PTC) (27B) TOTAL FEE FCC USE ONLY \$50.00 (28B) FCC CODE 1 (29B) FCC CODE 2 50.00 0000776319 SECTION D - CERTIFICATION (30) CERTIFICATION STATEMENT , certify under majety of perjury that the foregoing and supporting information is true and correct to

MASTERCARD/VISA ACCOUNT NUMBER:

SIGNATURE

SECTION E - CREDIT CARD PAYMENT INFORMATION

I hereby authorize the FCC to charge my VISA or MASTERCARD for the service(s)/authorization herein described.

the best of my knowledge, information and belief.

SIGNATURE.

MASTERCARD

VISA

(31)

DATE\_

EXPIRATION DATE:

VENDQH

FEDERAL COMMUNICATIONS

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COLE, RAYWID & BRAVERMAN, L.L.P.

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**BANK OF AMERICA** 02992 DC 15-120-540

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COLE, RAYWID & BRAVERMAN, L.L.P.

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FCC 603	FCC Wireless Telecommunications Bureau Application for Assignments of Authorization and Transfers of Control	Approved by OMB 3060 - 0800 See instructions for public burden estimate
		Submitted 02/28/2002 at 12:28PM
		File Number: 0000776263

1) Application Purpose: Transfer of Control	
2a) If this request is for an Amendment or Withdrawal, enter the File Number of the pending application currently on file with the FCC.	File Number:
2b) File numbers of related pending applications currently on file with the FCC:	

### Type of Transaction

3a) Is this a pro forma assignment of authorization or transfer of control? No

3b) If the answer to Item 3a is 'Yes', is this a notification of a pro forma transaction being filed under the Commission's forbearance procedures for telecommunications licenses?

4) For assignment of authorization only, is this a partition and/or disaggregation?

5a) Does this filing request a waiver of the Commission rules?

If 'Yes', attach an exhibit providing the rule numbers and explaining circumstances. No

5b) If a feeable waiver request is attached, multiply the number of stations (call signs) times the number of rule sections and enter the result.

6) Are attachments being filed with this application? Yes

7a) Does the transaction that is the subject of this application also involve transfer or assignment of other wireless licenses held by the assignor/transferor or affiliates of the assignor/transferor(e.g., parents, subsidiaries, or commonly controlled entities) that are not included on this form and for which Commission approval is required? Yes

7b) Does the transaction that is the subject of this application also involve transfer or assignment of non-wireless licenses that are not included on this form and for which Commission approval is required? **Yes** 

#### **Transaction Information**

8) How will assignment of authorization or transfer of control be accomplished? Sale or other assignment or transfer of stock If required by applicable rule, attach as an exhibit a statement on how control is to be assigned or transferred, along with copies of any pertinent contracts, agreements, instruments, certified copies of Court Orders, etc.

9) The assignment of authorization or transfer of control of license is: Voluntary

### Licensee/Assignor Information

10a) Taxpayer Identification Number	er: 841359446	10b) SGIN: 000	10c) FCC Registration Number (FRN): 0001604834	
11) First Name (if individual):	MI:	Last Name: Suffix:		
12) Entity Name (if not an individua	): TCI AMERICAN	CABLE HOLDING	S, L.P.	
13) Attention To: STEPHEN FLESS	NER ,		The first of the second	
14) P.O. Box: <b>5630</b>	And / Or	15) Street Address:		
16) City: DENVER		17) State: CO	18) Zip: <b>80217</b>	
19) Telephone Number: (720)267-2700		20) FAX:		
21) E-Mail Address:		, , , , , , , , , , , , , , , , , , , ,		

# 22) Race, Ethnicity, Gender of Assignor/Licensee (Optional)

Race:	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:			1
Gender:	Female:	Male:			

# Transferor Information (for transfers of control only)

23a) Taxpayer Identification Number:		23b) SGIN:	23c) FCC Registration Number (FRN): 0003470556	
24) First Name (if individual): MI:		Last Name:	Suffix:	
25) Entity Name (if not an individu	ial): AT&T CO	₹P.		
26) P.O. Box:	And / Or	27) Street Address: 32 AVENUE OF THE AMERICAS		
28) City: NEW YORK		29) State: NY	30) Zip: 10013	
31) Telephone Number: (212)387	-4000	32) FAX:		
33) E-Mail Address:				

# Name of Transferor Contact Representative (if other than Transferor) (for transfers of control only)

34) First Name: STEPHEN	MI:	Last Name: HORVITZ	Suffix:
35) Company Name: COLE, R.	AYWID & BRA	VERMAN, LLP	
36) P.O. Box:	And / Or	37) Street Address: 1919 PENNSYI	LVANIA AVENUE, N.W., SUITE 200
38) City: WASHINGTON		39) State: DC	(40) Zip: 20006
41) Telephone Number: (202)659-9750		42) FAX:	
43) E-Mail Address:			

# Assignee/Transferee Information

45a) Taxpayer Identification Numbe	r: 270000798	45b) SGIN: 000	45c) FCC Registration Number (FRN): 0006329247
46) First Name (if individual): MI:		Last Name:	Suffix:
47) Entity Name (if other than individ	dual): AT&T COM	CAST CORPORAT	ION
48) Name of Real Party in Interest:			49) TIN:
50) Attention To: THOMAS R. NATH	IAN		
51) P.O. Box:	And / Or	52) Street Addre	ss: 1500 MARKET STREET
53) City: PHILADELPHIA		54) State: PA	55) Zip: <b>19102</b>
56) Telephone Number: (215)981-7535		57) FAX:	
58) E-Mail Address:	, , , , , , , , , , , , , , , , , , ,		

# Name of Assignee/Transferee Contact Representative (if other than Assignee/Transferee)

		•	J
59) First Name: RENEE	MI:	Last Name: CALLAHAN	Suffix:
60) Company Name: LAWLER, I	METZGER & MILKN	IAN, LLC	3
61) P.O. Box:	And / Or	T, NW, SUITE 820	
63) City: WASHINGTON		64) State: DC	65) Zip: 20006
66) Telephone Number: (202)777-7700		67) FAX:	
68) E-Mail Address:			
OO) E-IVIAII AUUTESS:			

# Alien Ownership Questions

69) Is the Assignee or Transferee a foreign government or the representative of any foreign government?  70) Is the Assignee or Transferee an alien or the representative of an alien?	No
71) Is the Assignee or Transferee a corporation organized under the laws of any foreign government?	No
72) Is the Assignee or Transferee a corporation of which more than one-fifth of the capital stock is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country?	No
73) Is the Assignee or Transferee directly or indirectly controlled by any other corporation of which more than one-fourth of the capital stock is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? If 'Yes', attach exhibit explaining nature and extent of alien or foreign ownership or control.	No

# **Basic Qualification Questions**

74) Has the Assignee or Transferee or any party to this application had any FCC station authorization, license or construction permit revoked or had any application for an initial, modification or renewal of FCC station authorization, license, construction permit denied by the Commission? If 'Yes', attach exhibit explaining circumstances.	No
75) Has the Assignee or Transferee or any party to this application, or any party directly or indirectly controlling the Assignee or Transferee, or any party to this application ever been convicted of a felony by any state or federal court? If 'Yes', attach exhibit explaining circumstances.	No
76) Has any court finally adjudged the Assignee or Transferee, or any party directly or indirectly controlling the Assignee or Transferee guilty of unlawfully monopolizing or attempting unlawfully to monopolize radio communication, directly or indirectly, through control of manufacture or sale of radio apparatus, exclusive traffic arrangement, or any other means or unfair methods of competition? If 'Yes', attach exhibit explaining circumstances.	No
77) Is the Assignee or Transferee, or any party directly or indirectly controlling the Assignee or Transferee currently a party in any pending matter referred to in the preceding two items? If 'Yes', attach exhibit explaining circumstances.	No

# 78) Race, Ethnicity, Gender of Assignee/Transferee (Optional)

Kaco.	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:			
Gender:	Female:	Male:			

# **Assignor/Transferor Certification Statements**

transferred until the consent of the required because the transaction	e Federal Communicat is subject to streamline	authorization will not be assigned or that ions Commission has been given, or (2) ted notification procedures for pro forma as a and Order, 13 FCC Rcd. 6293(1998).	hat prior Commission consent is not	
The Assignor or Transferor cer incorporated by reference are ma	tifies that all statement terial, are part of this a	s made in this application and in the exhit pplication, and are true, complete, correct	oits, attachments, or in documents	
79) Typed or Printed Name of Pa				
First Name: RICK	MI: D	Last Name: BAILEY	Suffix:	
80) Title: VICE PRESIDENT				
Signature: RICK D BAILEY		81) Date: 02/28/02		

# Assignee/Transferee Certification Statements

- 1) The Assignee or Transferee certifies either (1) that the authorization will not be assigned or that control of the license will not be transferred until the consent of the Federal Communications Commission has been given, or (2) that prior Commission consent is not required because the transaction is subject to streamlined notification procedures for pro forma assignments and transfers by telecommunications carriers See Memorandum Opinion and Order, 13 FCC Rcd. 6293 (1998).
- 2) The Assignee or Transferee waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application.
- 3) The Assignee or Transferee certifies that grant of this application would not cause the Assignee or Transferee to be in violation of any pertinent cross-ownership, attribution, or spectrum cap rule.\*
- \*If the applicant has sought a waiver of any such rule in connection with this application, it may make this certification subject to the outcome of the waiver request.
- 4) The Assignee or Transferee agrees to assume all obligations and abide by all conditions imposed on the Assignor or Transferor under the subject authorization(s), unless the Federal Communications Commission pursuant to a request made herein otherwise allows, except for liability for any act done by, or any right accured by, or any suit or proceeding had or commenced against the Assignor or Transferor prior to this assignment.
- 5) The Assignee or Transferee certifies that all statements made in this application and in the exhibits, attachments, or in documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.
- 6) The Assignee or Transferee certifies that neither it nor any other party to the application is subject to a denial of Federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1998, 21 U.S.C § 862, because of a conviction for possession or distribution of a controlled substance. See Section 1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification.
- 7) The applicant certifies that it either (1) has an updated Form 602 on file with the Commission, (2) is filing an updated Form 602 simultaneously with this application, or (3) is not required to file Form 602 under the Commission's Rules.

# 82) Typed or Printed Name of Party Authorized to Sign

First Name: ARTHUR	MI: R	Last Name: BLOCK	Suffix:
83) Title: OFFICER			
Signature: ARTHUR R BLOCK		84) Date: 02/28/02	
WILLFUL FALSE STATEMENTS MADE IMPRISONMENT (U.S. Code, Title 18, 1 PERMIT (U.S. Code, Title 47, Section 3	Section 1001) AND/OR I	REVOCATION OF ANY STATION LIC	ENSE OF CONSTRUCTION

## Authorizations To Be Assigned or Transferred

85) Call Sign	86) Radio Service	87) Location Number	88) Path Number (Microwave only) 89) Lower or Cent Frequency (MHz	er 90) Upper Frequency ) (MHz)	91) Constructed Yes / No
KRU929	AL				Yes
KZQ206	AL				Yes

FCC Form 603 Schedule A

# Schedule for Assignments of Authorization and Transfers of Control in Auctioned Services

Approved by OMB 3060 - 0800 See instructions for public burden estimate

## Assignments of Authorization

# 1) Assignee Eligibility for Installment Payments (for assignments of authorization only)

is the Assignee claiming the same category or a smaller category of eligibility for installment payments as the Assignor (as determined by the applicable rules governing the licenses issued to the Assignor)?

If 'Yes', is the Assignee applying for installment payments?

# 2) Gross Revenues and Total Assets Information (if required) (for assignments of authorization only)

Refer to applicable auction rules for method to determine required gross revenues and total assets information

Year 1 Gross Revenues (current)	Year 2 Gross Revenues	Year 3 Gross Revenues	Total Assets:
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## 3) Certification Statements

# For Assignees Claiming Eligibility as an Entrepreneur Under the General Rule

Assignee certifies that they are eligible to obtain the licenses for which they apply.

## For Assignees Claiming Eligibility as a Publicly Traded Corporation

Assignee certifies that they are eligible to obtain the licenses for which they apply and that they comply with the definition of a Publicly Traded Corporation, as set out in the applicable FCC rules.

## For Assignees Claiming Eligibility Using a Control Group Structure

Assignee certifies that they are eligible to obtain the licenses for which they apply.

Assignee certifies that the applicant's sole control group member is a pre-existing entity, if applicable.

# For Assignees Claiming Eligibility as a Very Small Business, Very Small Business Consortium, Small Business, or as a Small **Business Consortium**

Assignee certifies that they are eligible to obtain the licenses for which they apply.

Assignee certifies that the applicant's sole control group member is a pre-existing entity, if applicable.

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### Transfers of Control

## 4) Licensee Eligibility (for transfers of control only)

As a result of transfer of control, must the licensee now claim a larger or higher category of eligibility than was originally declared?

If 'Yes', the new category of eligibility of the licensee is:

## Certification Statement for Transferees

Transferee certifies that the answers provided in Item 4 are true and correct.

#### Attachment List

Attachment Type	Date	Description	Contents
Other	02/19/02	DESCRIPTION OF TRANSACTION/PUBLIC INTEREST STATEMENT	0177282708473443116828858.pdf

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	SIGNATU	RF	<del></del> -				• · -			lj.
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# COLE, RAYWID & BRAVERMAN, L.L.P.

VENDOR

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COLE, RAYWID & BRAVERMAN, L.L.P.
1919 PENNSYLVANIA AVE. N.W.

WASHINGTON, DC 20006-3458

**BANK OF AMERICA** 02992 DC 15-120-540

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COLE, RAYWID & BRAVERMAN, L.L.P.

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FCC 603	FCC Wireless Telecommunications Bureau Application for Assignments of Authorization and Transfers of Control	Approved by OMB 3060 - 0800 See instructions for public burden estimate
		Submitted 02/28/2002 at 12:20PM
		File Number: 0000776223

1) Application Purpose: Transfer of Control	
2a) If this request is for an Amendment or Withdrawal, enter the File Number of the pending application currently on file with the FCC.	File Number:
2b) File numbers of related pending applications currently on file with the FCC:	<u> </u>

#### Type of Transaction

3a) Is this a pro forma assignment of authorization or transfer of control? No

3b) If the answer to Item 3a is 'Yes', is this a notification of a *pro forma* transaction being filed under the Commission's forbearance procedures for telecommunications licenses?

4) For assignment of authorization only, is this a partition and/or disaggregation?

5a) Does this filing request a waiver of the Commission rules?

If 'Yes', attach an exhibit providing the rule numbers and explaining circumstances. No

5b) If a feeable waiver request is attached, multiply the number of stations (call signs) times the number of rule sections and enter the result.

6) Are attachments being filed with this application? Yes

7a) Does the transaction that is the subject of this application also involve transfer or assignment of other wireless licenses held by the assignor/transferor or affiliates of the assignor/transferor(e.g., parents, subsidiaries, or commonly controlled entities) that are not included on this form and for which Commission approval is required? **Yes** 

7b) Does the transaction that is the subject of this application also involve transfer or assignment of non-wireless licenses that are not included on this form and for which Commission approval is required? Yes

#### Transaction Information

8) How will assignment of authorization or transfer of control be accomplished? Sale or other assignment or transfer of stock if required by applicable rule, attach as an exhibit a statement on how control is to be assigned or transferred, along with copies of any pertinent contracts, agreements, instruments, certified copies of Court Orders, etc.

9) The assignment of authorization or transfer of control of license is: Voluntary

#### Licensee/Assignor Information

10a) Taxpayer Identification Number: 841359094		10b) SGIN: 000	10c) FCC Registration Number (FRN): 0001604859	
11) First Name (if individual):	MI:	Last Name:	Suffix:	
12) Entity Name (if not an individua	I): TCI AMERICAI	N CABLE HOLDING	S II, L.P.	
13) Attention To: STEPHEN FLESS	NER			
14) P.O. Box: <b>5630</b>	And / Or	15) Street Addre	SS:	
16) City: DENVER		17) State: CO	18) Zip: <b>80217</b>	
19) Telephone Number: (720)267-2700		20) FAX:		
21) E-Mail Address:	V			

# 22) Race, Ethnicity, Gender of Assignor/Licensee (Optional)

Race:	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:			'
Gender:	Female:	Male:			

## Transferor Information (for transfers of control only)

23a) Taxpayer Identification Num	ber:	23b) SGIN:	23c) FCC Registration Number (FRN): 0003470556	
24) First Name (if individual):	MI:	Last Name:	Suffix:	
25) Entity Name (if not an individu	ai): AT&T COF	RP.		
26) P.O. Box:	And / Or	27) Street Address: 32 AVENUE OF THE AMERICAS		
28) City: NEW YORK		29) State: NY	30) Zip: 10013	
31) Telephone Number: (212)387-4000		32) FAX:		<u> </u>
33) E-Mail Address:				

# Name of Transferor Contact Representative (if other than Transferor) (for transfers of control only)

MI:	Last Name: HORVITZ	Suffix;			
AYWID & BRA	VERMAN, LLP	Table 1 Table			
And / Or	37) Street Address: 1919 PENNSY	LVANIA AVENUE, N.W., SUITE 200			
	39) State: DC	40) Zip: 20006			
659-9750	42) FAX:				
43) E-Mail Address:					
	AYWID & BRA	AYWID & BRAVERMAN, LLP And / Or 37) Street Address: 1919 PENNSY 39) State: DC			

## Assignee/Transferee Information

44) The Assignee is a(n): Corporat	ion		
45a) Taxpayer Identification Numbe	r: <b>270000798</b>	45b) SGIN: 000	45c) FCC Registration Number (FRN): 0006329247
46) First Name (if individual):	MI:	Last Name:	Suffix:
47) Entity Name (if other than individ	dual): AT&T COM	CAST CORPORAT	ION
48) Name of Real Party in Interest:	**************************************		49) TIN:
50) Attention To: THOMAS R. NATH	IAN		
51) P.O. Box:	And / Or	52) Street Addre	ss: 1500 MARKET STREET
53) City: PHILADELPHIA		54) State: PA	55) Zip: 19102
56) Telephone Number: (215)981-7535		57) FAX:	
58) E-Mail Address:		-	· · · · · · · · · · · · · · · · · · ·

# Name of Assignee/Transferee Contact Representative (if other than Assignee/Transferee)

59) First Name: RENEE	MI:	Last Name: CALLAHAN	Suffix:
60) Company Name: LAWLER,	METZGER & MILKN	IAN, LLC	AND
61) P.O. Box:	And / Or	62) Street Address: 1909 K STREE	T, NW, SUITE 820
63) City: WASHINGTON		64) State: DC	65) Zip: 20006
66) Telephone Number: (202)77	7-7700	67) FAX:	
68) E-Mail Address:	7.60		

# Alien Ownership Questions

### **Basic Qualification Questions**

74) Has the Assignee or Transferee or any party to this application had any FCC station authorization, license or construction permit revoked or had any application for an initial, modification or renewal of FCC station authorization, license, construction permit denied by the Commission? If 'Yes', attach exhibit explaining circumstances.	No
75) Has the Assignee or Transferee or any party to this application, or any party directly or indirectly controlling the Assignee or Transferee, or any party to this application ever been convicted of a felony by any state or federal court? If 'Yes', attach exhibit explaining circumstances.	No
76) Has any court finally adjudged the Assignee or Transferee, or any party directly or indirectly controlling the Assignee or Transferee guilty of unlawfully monopolizing or attempting unlawfully to monopolize radio communication, directly or indirectly, through control of manufacture or sale of radio apparatus, exclusive traffic arrangement, or any other means or unfair methods of competition? If 'Yes', attach exhibit explaining circumstances.	:1
77) Is the Assignee or Transferee, or any party directly or indirectly controlling the Assignee or Transferee currently a party in any pending matter referred to in the preceding two items? If 'Yes', attach exhibit explaining circumstances.	No

## 78) Race, Ethnicity, Gender of Assignee/Transferee (Optional)

Race:	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:			
Gender:	Female:	Male:			

## Assignor/Transferor Certification Statements

transferred until the consent of the required because the transaction is	Federal Communicat subject to streamline	authorization will not be assigned or that ions Commission has been given, or (2) and notification procedures for pro forma and and Order, 13 FCC Rcd. 6293(1998).	that prior Commission consent is not
The Assignor or Transferor certificorporated by reference are mate	fies that all statement erial, are part of this a	s made in this application and in the exhil pplication, and are true, complete, correct	bits, attachments, or in documents
79) Typed or Printed Name of Party			
First Name: RICK	MI: D	Last Name: BAILEY	Suffix:
80) Title: VICE PRESIDENT			•
Signature: RICK D BAILEY		81) Date: 02/28/02	

### Assignee/Transferee Certification Statements

- 1) The Assignee or Transferee certifies either (1) that the authorization will not be assigned or that control of the license will not be transferred until the consent of the Federal Communications Commission has been given, or (2) that prior Commission consent is not required because the transaction is subject to streamlined notification procedures for pro forma assignments and transfers by telecommunications carriers See Memorandum Opinion and Order, 13 FCC Rcd. 6293 (1998).
- 2) The Assignee or Transferee waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application.
- 3) The Assignee or Transferee certifies that grant of this application would not cause the Assignee or Transferee to be in violation of any pertinent cross-ownership, attribution, or spectrum cap rule.\*
- If the applicant has sought a waiver of any such rule in connection with this application, it may make this certification subject to the outcome of the waiver request.
- 4) The Assignee or Transferee agrees to assume all obligations and abide by all conditions imposed on the Assignor or Transferor under the subject authorization(s), unless the Federal Communications Commission pursuant to a request made herein otherwise allows, except for liability for any act done by, or any right accured by, or any suit or proceeding had or commenced against the Assignor or Transferor prior to this assignment.
- 5) The Assignee or Transferee certifies that all statements made in this application and in the exhibits, attachments, or in documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.
- 6) The Assignee or Transferee certifies that neither it nor any other party to the application is subject to a denial of Federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1998, 21 U.S.C § 862, because of a conviction for possession or distribution of a controlled substance. See Section 1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification.
- 7) The applicant certifies that it either (1) has an updated Form 602 on file with the Commission, (2) is filing an updated Form 602 simultaneously with this application, or (3) is not required to file Form 602 under the Commission's Rules.

#### 82) Typed or Printed Name of Party Authorized to Sign

First Name: ARTHUR	MI: R	Last Name: BLOCK	Suffix:			
83) Title: OFFICER						
Signature: ARTHUR R BLOCK		84) Date: 02/28/02				
WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, Section 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).						

#### Authorizations To Be Assigned or Transferred

85) Call Sign	86) Radio Service		90) Upper Frequency (MHz)	91) Constructed Yes / No
KNCD489	AL			Yes

FCC Form 603 Schedule A

# Schedule for Assignments of Authorization and Transfers of Control in Auctioned Services

Approved by OMB 3060 - 0800 See instructions for public burden estimate

#### Assignments of Authorization

## 1) Assignee Eligibility for Installment Payments (for assignments of authorization only)

Is the Assignee claiming the same category or a smaller category of eligibility for installment payments as the Assignor (as determined by the applicable rules governing the licenses issued to the Assignor)?

If 'Yes', is the Assignee applying for installment payments?

### 2) Gross Revenues and Total Assets Information (if required) (for assignments of authorization only)

Refer to applicable auction rules for method to determine required gross revenues and total assets information

Year 1 Gross Revenues (current)	Year 2 Gross Revenues	Year 3 Gross Revenues	Total Assets:
(00)		•	

#### 3) Certification Statements

#### For Assignees Claiming Eligibility as an Entrepreneur Under the General Rule

Assignee certifies that they are eligible to obtain the licenses for which they apply.

#### For Assignees Claiming Eligibility as a Publicly Traded Corporation

Assignee certifies that they are eligible to obtain the licenses for which they apply and that they comply with the definition of a Publicly Traded Corporation, as set out in the applicable FCC rules.

#### For Assignees Claiming Eligibility Using a Control Group Structure

Assignee certifies that they are eligible to obtain the licenses for which they apply.

Assignee certifies that the applicant's sole control group member is a pre-existing entity, if applicable.

# For Assignees Claiming Eligibility as a Very Small Business, Very Small Business Consortium, Small Business, or as a Small Business Consortium

Assignee certifies that they are eligible to obtain the licenses for which they apply.

Assignee certifies that the applicant's sole control group member is a pre-existing entity, if applicable.

#### For Assignees Claiming Eligibility as a Rural Telephone Company

Assignee certifies that they meet the definition of a Rural Telephone Company as set out in the applicable FCC rules, and must disclose all parties to agreement(s) to partition licenses won in this auction. See applicable FCC rules.

#### Transfers of Control

#### 4) Licensee Eligibility (for transfers of control only)

As a result of transfer of control, must the licensee now claim a larger or higher category of eligibility than was originally declared?

If 'Yes', the new category of eligibility of the licensee is:

#### **Certification Statement for Transferees**

Transferee certifies that the answers provided in Item 4 are true and correct.

#### **Attachment List**

Attachment Type	Date	Description	Contents
Other	02/19/02	DESCRIPTION OF TRANSACTION/PUBLIC INTEREST STATEMENT	0177282632919694792026868.pdf

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING Approved by OMB FEDERAL COMMUNICATIONS COMMISSION 3060-0589 REMITTANCE ADVICE Page No 1 of 1 (1) LOCKBOX # 358994 SPECIAL USE FCC/MALLON MAR J 6 2002 FCC USE ONLY SECTION A - PAYER INFORMATION (2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) (3) TOTAL AMOUNT PAID (U.S. Dollars and cents) Cole, Raywid & Braverman, L.L. \$50.00 (4) STREET ADDRESS LINE NO. 1 1919 Pennsylvania Ave., N.W. (5) STREET ADDRESS LINE NO. 2 Suite 200 (6) CITY (7) STATE (8) ZIP CODE Washington DC 20006 (9) DAYTIME TELEPHONE NUMBER (include area code) (10) COUNTRY CODE (if not in U.S.A.) 202 - 6599750 US FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED (11) PAYER (FRN) (12) PAYER (TIN) 0003 78 7942 0520820071 IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) (13) APPLICANT NAME AT&T COMCAST CORPORATION (14) STREET ADDRESS LINE NO. 1 1500 MARKET STREET (15) STREET ADDRESS LINE NO. 2 (16) CITY (17) STATE (18) ZIP CODE **PHILADELPHIA** PA 19102 (19) DAYTIME TELEPHONE NUMBER (include area code) (20) COUNTRY CODE (if not in U.S.A.) (215) 981-7535 FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED (21) APPLICANT (FRN) (22) APPLICANT (TIN) 0006 9247 0270000798 COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET (23A) CALL SIGN/OTHER ID (24A) PAYMENT TYPE CODE (25A) QUANTITY KNCD489 PATM (26A) FEE DUE FOR (PTC) (27A) TOTAL FEE FCC USE ONLY \$50.00 \$50.00 (28A) FCC CODE I (29A) FCC CODE 2 0000776223 (23B) CALL SIGN/OTHER ID (24B) PAYMENT TYPE CODE (25B) QUANTITY (26B) FEE DUE FOR (PTC) (27B) TOTAL FEE FCC USE ONLY (28B) FCC CODE I (29B) FCC CODE 2 SECTION D - CERTIFICATION (30) CERTIFICATION STATEMENT foregoing and supporting information is true and correct to the best of my knowledge, information and belief. SECTION E - CREDIT CARD PAYMENT INFORMATION MASTERCARD/VISA ACCOUNT NUMBER: (31)**EXPIRATION** 

I hereby authorize the FCC to charge my VISA or MASTERCARD for the service(s)/authorization herein described.

MASTERCARD

SIGNATURE

VISA

DATE\_

DATE:

# COLE, RAYWID & BRAVERMAN, L.L.P.

**VENDOR** 

FEDERAL COMMUNICATIONS

CHECK NO.

74507

OUR REF. NO.	YOUR INV. NO.	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT TAKEN
40364	030102	03/01/2002	50.00	50.00	0.00
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COLE, RAYWID & BRAVERMAN, L.L.P.

**BANK OF AMERICA** 

CHECK NO.

**CHECK DATE** 

VENDOR NO.

1919 PENNSYLVANIA AVE. N.W. WASHINGTON, DC 20006-3458

02992 DC 15-120-540

74507

03/01/2002

Details on back

₿

**FCC** 

PAY

Fifty and NO/100

**CHECK AMOUNT** 

50.00

TO THE **ORDER** OF

FEDERAL COMMUNICATIONS

COMMISSION

#074507# 1:0540012041: 002086050069#

COLE, RAYWID & BRAVERMAN, L.L.P.

74507

74507

40364

030102

03/01/2002

50.00

50.00

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FCC Wireless Telecommunications Bureau
Application for Assignments of Authorization
and Transfers of Control

Approved by OMB
3060 - 0800
See instructions for
public burden estimate

Submitted 02/28/2002
at 03:09PM

File Number:
0000790431

1) Application Purpose: Transfer of Control	· · · · · · · · · · · · · · · · · · ·
2a) If this request is for an Amendment or Withdrawal, enter the File Number of the pending application currently on file with the FCC.	File Number:
2b) File numbers of related pending applications currently on file with the FCC:	

#### Type of Transaction

3a) Is this a pro forma assignment of authorization or transfer of control? Yes

- 3b) If the answer to Item 3a is 'Yes', is this a notification of a pro forma transaction being filed under the Commission's forbearance procedures for telecommunications licenses? **No**
- 4) For assignment of authorization only, is this a partition and/or disaggregation?
- 5a) Does this filing request a waiver of the Commission rules?
- If 'Yes', attach an exhibit providing the rule numbers and explaining circumstances. No
- 5b) If a feeable waiver request is attached, multiply the number of stations (call signs) times the number of rule sections and enter the result.
- 6) Are attachments being filed with this application? Yes
- 7a) Does the transaction that is the subject of this application also involve transfer or assignment of other wireless licenses held by the assignor/transferor or affiliates of the assignor/transferor(e.g., parents, subsidiaries, or commonly controlled entities) that are not included on this form and for which Commission approval is required? **Yes**
- 7b) Does the transaction that is the subject of this application also involve transfer or assignment of non-wireless licenses that are not included on this form and for which Commission approval is required? **Yes**

#### Transaction Information

- 8) How will assignment of authorization or transfer of control be accomplished? Sale or other assignment or transfer of stock if required by applicable rule, attach as an exhibit a statement on how control is to be assigned or transferred, along with copies of any pertinent contracts, agreements, instruments, certified copies of Court Orders, etc.
- 9) The assignment of authorization or transfer of control of license is: Voluntary

#### Licensee/Assignor Information

10a) Taxpayer Identification Number	er: 521466272	10b) SGIN: 000	10c) FCC Registration Number (FRN): 0002148096	
11) First Name (if individual):	MI:	Last Name:	Suffix:	
12) Entity Name (if not an individual	): PARNASSOS,	L.P.		
13) Attention To:				
14) P.O. Box:	And / Or	15) Street Addre	ss: 1 NORTH MAIN STREET	
16) City: COUDERSPORT		17) State: PA	18) Zip: <b>16915</b>	
19) Telephone Number: (814)274-9830		20) FAX:		
21) E-Mail Address:				

22) Race, Ethnicity, Gender of Assignor/Licensee (Optional)

Mace.	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:			
Gender:	Female:	Male:			

# Transferor Information (for transfers of control only)

23a) Taxpayer Identification Number:		23b) SGIN:	23c) FCC Registration Number (FRN): 0003470556	
24) First Name (if individual): MI:		Last Name:	Suffix:	
25) Entity Name (if not an individu	ual): AT&T COF	₹P.		
26) P.O. Box:	And / Or	27) Street Address: 32 AVENUE OF THE AMERICAS		
28) City: NEW YORK	THE RESERVE OF THE PROPERTY OF	29) State: NY	30) Zip: 10013	
31) Telephone Number: (212)387-4000		32) FAX:		
33) E-Mail Address:				

# Name of Transferor Contact Representative (if other than Transferor) (for transfers of control only)

34) First Name: STEVEN	MI:	Last Name: HORVITZ	Suffix:
35) Company Name: COLE, I	RAYWID & BRA	VERMAN, LLP	
36) P.O. Box:	And / Or	37) Street Address: 1919 PENNSY	LVANIA AVENUE, NW., SUITE 200
38) City: WASHINGTON		39) State: DC	40) Zip: <b>20006</b>
41) Telephone Number: (202)	659-9750	42) FAX:	
43) E-Mail Address:			

## Assignee/Transferee Information

45a) Taxpayer Identification Number	er: 270000798	45b) SGIN: 000	45c) FCC Registration Number (FRN): 0006329247
46) First Name (if individual):	MI:	Last Name:	Suffix:
47) Entity Name (if other than indivi	dual): AT&T COM	CAST CORPORAT	ION
48) Name of Real Party in Interest:		The state of the s	49) TIN:
50) Attention To: THOMAS R. NAT	HAN		***************************************
51) P.O. Box:	And / Or	52) Street Addre	ss: 1500 MARKET STREET
53) City: PHILADELPHIA		54) State: <b>PA</b>	55) Zip: <b>19102</b>
56) Telephone Number: (215)981-7	535	57) FAX:	
58) E-Mail Address:			

## Name of Assignee/Transferee Contact Representative (if other than Assignee/Transferee)

59) First Name: <b>RENEE</b>	MI:	Last Name: CALLAHAN	Suffix:
60) Company Name: LAWLER,	METZGER & MILK	MAN, LLC	
61) P.O. Box:	And / Or	62) Street Address: 1909 K STREE	T, NW., SUITE 820
63) City: WASHINGTON		64) State: DC	65) Zip: <b>20006</b>
66) Telephone Number: (202)77	7-7700	67) FAX:	
68) E-Mail Address:		· · · · · · · · · · · · · · · · · · ·	

## Alien Ownership Questions

69) Is the Assignee or Transferee a foreign government or the representative of any foreign government?	No
70) Is the Assignee or Transferee an alien or the representative of an alien?	No
71) Is the Assignee or Transferee a corporation organized under the laws of any foreign government?	No
72) Is the Assignee or Transferee a corporation of which more than one-fifth of the capital stock is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country?	No
73) Is the Assignee or Transferee directly or indirectly controlled by any other corporation of which more than one-fourth of the capital stock is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? If 'Yes', attach exhibit explaining nature and extent of alien or foreign ownership or control.	No

## **Basic Qualification Questions**

74) Has the Assignee or Transferee or any party to this application had any FCC station authorization, license or construction permit revoked or had any application for an initial, modification or renewal of FCC station authorization, license, construction permit denied by the Commission? If 'Yes', attach exhibit explaining circumstances.	No
75) Has the Assignee or Transferee or any party to this application, or any party directly or indirectly controlling the Assignee or Transferee, or any party to this application ever been convicted of a felony by any state or federal court? If 'Yes', attach exhibit explaining circumstances.	No
76) Has any court finally adjudged the Assignee or Transferee, or any party directly or indirectly controlling the Assignee or Transferee guilty of unlawfully monopolizing or attempting unlawfully to monopolize radio communication, directly or indirectly, through control of manufacture or sale of radio apparatus, exclusive traffic arrangement, or any other means or unfair methods of competition? If 'Yes', attach exhibit explaining circumstances.	No
77) Is the Assignee or Transferee, or any party directly or indirectly controlling the Assignee or Transferee currently a party in any pending matter referred to in the preceding two items? If 'Yes', attach exhibit explaining circumstances.	No

# 78) Race, Ethnicity, Gender of Assignee/Transferee (Optional)

Kace.	American Indian or Alaska Native:	Asian:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:		
Gender:	Female:	Male:		

# Assignor/Transferor Certification Statements

transferred until the consent of the required because the transaction i	Federal Communicati s subject to streamline	authorization will not be assigned or that ions Commission has been given, or (2) to do notification procedures for pro forma as and Order, 13 FCC Rcd. 6293(1998).	that prior Commission consent is not
		s made in this application and in the exhil oplication, and are true, complete, correct	
79) Typed or Printed Name of Part	ly Authorized to Sign		
First Name: RICK	MI: D	Last Name: BAILEY	Suffix:
80) Title: VICE PRESIDENT			
Signature: RICK D BAILEY		81) Date: 02/28/02	

## **Assignee/Transferee Certification Statements**

- 1) The Assignee or Transferee certifies either (1) that the authorization will not be assigned or that control of the license will not be transferred until the consent of the Federal Communications Commission has been given, or (2) that prior Commission consent is not required because the transaction is subject to streamlined notification procedures for *pro forma* assignments and transfers by telecommunications carriers See Memorandum Opinion and Order, 13 FCC Rcd. 6293 (1998).
- 2) The Assignee or Transferee waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application.
- 3) The Assignee or Transferee certifies that grant of this application would not cause the Assignee or Transferee to be in violation of any pertinent cross-ownership, attribution, or spectrum cap rule.\*
- "If the applicant has sought a waiver of any such rule in connection with this application, it may make this certification subject to the outcome of the waiver request.
- 4) The Assignee or Transferee agrees to assume all obligations and abide by all conditions imposed on the Assignor or Transferor under the subject authorization(s), unless the Federal Communications Commission pursuant to a request made herein otherwise allows, except for liability for any act done by, or any right accured by, or any suit or proceeding had or commenced against the Assignor or Transferor prior to this assignment.
- 5) The Assignee or Transferee certifies that all statements made in this application and in the exhibits, attachments, or in documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.
- 6) The Assignee or Transferee certifies that neither it nor any other party to the application is subject to a denial of Federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1998, 21 U.S.C § 862, because of a conviction for possession or distribution of a controlled substance. See Section 1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification.
- 7) The applicant certifies that it either (1) has an updated Form 602 on file with the Commission, (2) is filing an updated Form 602 simultaneously with this application, or (3) is not required to file Form 602 under the Commission's Rules.

#### 82) Typed or Printed Name of Party Authorized to Sign

First Name: ARTHUR	MI: R	Last Name: BLOCK	Suffix:
83) Title: OFFICER			Michael Martine de Carlos de Carlos de Martine de Martine de Carlos de Carlo
Signature: ARTHUR R BLOCK		84) Date: 02/28/02	
WILLFUL FALSE STATEMENTS MADE ON IMPRISONMENT (U.S. Code, Title 18, Sect PERMIT (U.S. Code, Title 47, Section 312)	ion 1001) AND/OR	REVOCATION OF ANY STATION LI	CENSE OR CONSTRUCTION

### Authorizations To Be Assigned or Transferred

85) Call Sign	86) Radio Service	87) Location Number		89) Lower or Center Frequency (MHz)	90) Upper Frequency (MHz)	91) Constructed Yes / No
WNKE706	AL		·			Yes
KFM729	AL					Yes
KNDB516	AL					Yes
WYQ717	AL					Yes
WNNQ605	AL					Yes
WNSQ475	AL					Yes
WNSQ476	AL					Yes
KNFB326	AL					Yes
WNAX740	AL					Yes
WNVJ292	AL					Yes
WNAU571	AL					Yes
WPCI360	AL					Yes

FCC Form 603 Schedule A

# Schedule for Assignments of Authorization and Transfers of Control in Auctioned Services

Approved by OMB 3060 - 0800 See instructions for public burden estimate

#### Assignments of Authorization

### Assignee Eligibility for Installment Payments (for assignments of authorization only)

Is the Assignee claiming the same category or a smaller category of eligibility for installment payments as the Assignor (as determined by the applicable rules governing the licenses issued to the Assignor)?

If 'Yes', is the Assignee applying for installment payments?

## 2) Gross Revenues and Total Assets Information (if required) (for assignments of authorization only)

Refer to applicable auction rules for method to determine required gross revenues and total assets information

Year 1 Gross Revenues (current)	Year 2 Gross Revenues	Year 3 Gross Revenues	Total Assets:	****
			•	ł

#### 3) Certification Statements

#### For Assignees Claiming Eligibility as an Entrepreneur Under the General Rule

Assignee certifies that they are eligible to obtain the licenses for which they apply.

#### For Assignees Claiming Eligibility as a Publicly Traded Corporation

Assignee certifies that they are eligible to obtain the licenses for which they apply and that they comply with the definition of a Publicly Traded Corporation, as set out in the applicable FCC rules.

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Assignee certifies that they meet the definition of a Rural Telephone Company as set out in the applicable FCC rules, and must disclose all parties to agreement(s) to partition licenses won in this auction. See applicable FCC rules.

#### Transfers of Control

#### 4) Licensee Eligibility (for transfers of control only)

As a result of transfer of control, must the licensee now claim a larger or higher category of eligibility than was originally declared?

If 'Yes', the new category of eligibility of the licensee is:

#### **Certification Statement for Transferees**

Transferee certifies that the answers provided in Item 4 are true and correct.

#### Attachment List

Attachment Type	Date	Description	Contents
Other	02/28/02	DESCRIPTION OF TRANSACTION/PUBLIC INTEREST STATEMENT	0177312377311075216887054.pdf

READ INSTRUCTIONS CAREFULLY Approved by OMB BEFORE PROCEEDING FEDERAL COMMUNICATIONS COMMISSION 3060-0589 Page No 1 of 3 REMITTANCE ADVICE SPECIAL USE FUC/MELLEN (1) LOCKBOX # 358994 MAR J 6 2002 FCC USE ONLY **SECTION A - PAYER INFORMATION** Carlon -(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) (3) TOTAL AMOUNT PAID (U.S. Dollars and cents) Cole, Raywid & Braverman, L.L. <sup>ਂ</sup> \$600.00 (4) STREET ADDRESS LINE NO. 1 1919 Pennsylvania Ave., N.W. (5) STREET ADDRESS LINE NO. 2 Suite 200 (6) CITY (7) STATE (8) ZIP CODE Washington DC 20006 (9) DAYTIME TELEPHONE NUMBER (include area code) (10) COUNTRY CODE (if not in U.S.A.) 202 - 6599750 US FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED (11) PAYER (FRN) (12) PAYER (TIN) 0003 78 7942 0520820071 IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) (13) APPLICANT NAME AT&T COMCAST CORPORATION (14) STREET ADDRESS LINE NO. I 1500 MARKET STREET (15) STREET ADDRESS LINE NO. 2 (16) CITY (17) STATE (18) ZIP CODE **PHILADELPHIA** PA 19102 (19) DAYTIME TELEPHONE NUMBER (include area code) (20) COUNTRY CODE (if not in U.S.A.) (215) 981-7535 FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED (21) APPLICANT (FRN) (22) APPLICANT (TIN) 0006 32 9247 0270000798 COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET (23A) CALL SIGN/OTHER ID (24A) PAYMENT TYPE CODE (25A) QUANTITY **KFM729 PATM** (26A) FEE DUE FOR (PTC) (27A) TOTAL FEE FCC USE ONLY \$50.00 \$50.00 (28A) FCC CODE I (29A) FCC CODE 2 0000790431 (23B) CALL SIGN/OTHER ID (24B) PAYMENT TYPE CODE (25B) QUANTITY **WYQ717 PATM** 1 (26B) FEE DUE FOR (PTC) (27B) TOTAL FEE FCC USE ONLY \$50.00 \$50.00 (28B) FCC CODE I (29B) FCC CODE 2 0000790431 **SECTION D - CERTIFICATION** (30) CERTIFICATION STATEMENT benalty of perjury that the foregoing and supporting information is true and correct to , certify under

SIGNATURE

MASTERCARD/VISA ACCOUNT NUMBER:

SECTION E - CREDIT CARD PAYMENT INFORMATION

I hereby authorize the FCC to charge my VISA or MASTERCARD for the service(s)/authorization herein described.

the best of my knowledge, information and belief.

SIGNATURE

MASTERCARD

VISA

(31)

DATE\_

**EXPIRATION** DATE:

## FEDERAL COMMUNICATIONS COMMISSION

SPECIAL USE	
FCC USE ONLY	

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FCC 603	FCC Wireless Telecommunications Bureau Application for Assignments of Authorization and Transfers of Control	Approved by OMB 3060 - 0800 See instructions for public burden estimate
		Submitted 03/05/2002 at 11:00AM
		File Number: 0000788740

1) Application Purpose: Amendment	
2a) If this request is for an Amendment or Withdrawal, enter the File Number of the pending application currently on file with the FCC.	File Number: 0000788740
2b) File numbers of related pending applications currently on file with the FCC:	

#### Type of Transaction

3a) Is this a pro forma assignment of authorization or transfer of control? No
4. Market 1997 1997 1997 1997 1997 1997 1997 199
3b) If the answer to Item 3a is 'Yes', is this a notification of a pro forma transaction being filed under the Commission's forbearance
procedures for telecommunications licenses?

4) For assignment of authorization only, is this a partition and/or disaggregation?

5a) Does this filing request a waiver of the Commission rules?

If 'Yes', attach an exhibit providing the rule numbers and explaining circumstances. No

5b) If a feeable waiver request is attached, multiply the number of stations (call signs) times the number of rule sections and enter the result.

6) Are attachments being filed with this application? Yes

7a) Does the transaction that is the subject of this application also involve transfer or assignment of other wireless licenses held by the assignor/transferor or affiliates of the assignor/transferor(e.g., parents, subsidiaries, or commonly controlled entities) that are not included on this form and for which Commission approval is required? **Yes** 

7b) Does the transaction that is the subject of this application also involve transfer or assignment of non-wireless licenses that are not included on this form and for which Commission approval is required? **Yes** 

#### **Transaction Information**

8) How will assignment of authorization or transfer of control be accomplished? Sale or other assignment or transfer of stock if required by applicable rule, attach as an exhibit a statement on how control is to be assigned or transferred, along with copies of any pertinent contracts, agreements, instruments, certified copies of Court Orders, etc.

9) The assignment of authorization or transfer of control of license is: Voluntary

#### Licensee/Assignor Information

10a) Taxpayer Identification Number	er: 841440966	10b) SGIN: 000	10c) FCC Registration Number (FRN): 0006417067		
11) First Name (if individual):	MI:	Last Name:	Suffix:		
12) Entity Name (if not an individual	): NATIONAL DIG	ITAL TELEVISION	CENTER, INC.		
13) Attention To: ERIC SHULTZ					
14) P.O. Box:	And / Or	15) Street Address: 4100 DRY CREEK RD			
16) City: LITTLETON		17) State: CO	18) Zip: <b>80122</b>		
19) Telephone Number: (303)486-3	694	20) FAX;	A Company of the Comp		
21) E-Mail Address:					

# 22) Race, Ethnicity, Gender of Assignor/Licensee (Optional)

	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:		Property of the Control of the Contr	` <b>\$</b>
Gender:	Female:	Male:	_		

## Transferor Information (for transfers of control only)

23a) Taxpayer Identification Num	ber:	23b) SGIN:	23c) FCC Registration Number (FRN): 0003470556	
24) First Name (if individual):	MI:	Last Name:	Suffix:	
25) Entity Name (if not an individu	al): AT&T CO	RP.		
26) P.O. Box:	And / Or	Or 27) Street Address: 32 AVENUE OF THE AMERICAS		
28) City: NEW YORK		29) State: NY	30) Zip: 10013	
31) Telephone Number: (212)387	-4000	32) FAX:	A CAMPAGE OF THE PROPERTY OF T	
33) E-Mail Address:		·		

# Name of Transferor Contact Representative (if other than Transferor) (for transfers of control only)

MI:	Last Name: HORVITZ	Suffix:	
YWID & BRA	VERMAN, LLP		
And / Or	37) Street Address: 1919 PENNSYL	VANIA AVENUE, NW., SUITE 200	
38) City: WASHINGTON		40) Zip: <b>20006</b>	
59-9750	42) FAX:		
	And / Or	And / Or 37) Street Address: 1919 PENNSYL 39) State: DC	

## Assignee/Transferee Information

45a) Taxpayer Identification Numbe	r: 270000798	45b) SGIN: 000	45c) FCC Registration Number (FRN): 0006329247
46) First Name (if individual):	MI:	Last Name:	Suffix:
47) Entity Name (if other than indivi	dual): AT&T COM	CAST CORPORAT	ION
48) Name of Real Party in Interest:			49) TIN:
50) Attention To: THOMAS R. NATI	-IAN		
51) P.O. Box:	And / Or	52) Street Addre	ess: 1500 MARKET STREET
53) City: PHILADELPHIA		54) State: PA	55) Zip: 19102
56) Telephone Number: (215)981-7	535	57) FAX:	
58) E-Mail Address:			

# Name of Assignee/Transferee Contact Representative (if other than Assignee/Transferee)

MI:	Last Name: CALLAHAN	Suffix:	
ETZGER & MILKN	IAN, LLC		
And / Or	62) Street Address: 1909 K STREET, NW., SUITE 820		
63) City: WASHINGTON		65) Zip: 20006	
7700	67) FAX:		
	ETZGER & MILKN And / Or	And / Or 62) Street Address: 1909 K STREE 64) State: DC	

## Alien Ownership Questions

69) Is the Assignee or Transferee a foreign government or the representative of any foreign government?	No
70) Is the Assignee or Transferee an alien or the representative of an alien?	No
71) Is the Assignee or Transferee a corporation organized under the laws of any foreign government?	No
72) Is the Assignee or Transferee a corporation of which more than one-fifth of the capital stock is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country?	No
73) Is the Assignee or Transferee directly or indirectly controlled by any other corporation of which more than one-fourth of the capital stock is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? If 'Yes', attach exhibit explaining nature and extent of alien or foreign ownership or control.	No

### **Basic Qualification Questions**

74) Has the Assignee or Transferee or any party to this application had any FCC station authorization, license or construction permit revoked or had any application for an initial, modification or renewal of FCC station authorization, license, construction permit denied by the Commission? If 'Yes', attach exhibit explaining circumstances.	No
75) Has the Assignee or Transferee or any party to this application, or any party directly or indirectly controlling the Assignee or Transferee, or any party to this application ever been convicted of a felony by any state or federal court? If 'Yes', attach exhibit explaining circumstances.	No
76) Has any court finally adjudged the Assignee or Transferee, or any party directly or indirectly controlling the Assignee or Transferee guilty of unlawfully monopolizing or attempting unlawfully to monopolize radio communication, directly or indirectly, through control of manufacture or sale of radio apparatus, exclusive traffic arrangement, or any other means or unfair methods of competition? If 'Yes', attach exhibit explaining circumstances.	No
77) Is the Assignee or Transferee, or any party directly or indirectly controlling the Assignee or Transferee currently a party in any pending matter referred to in the preceding two items? If 'Yes', attach exhibit explaining circumstances.	No

## 78) Race, Ethnicity, Gender of Assignee/Transferee (Optional)

Race:	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:			
Gender:	Female:	Male:			

### **Assignor/Transferor Certification Statements**

transferred until the consent of required because the transaction	the Federal Communicati in is subject to streamline	authorization will not be assigned or that ions Commission has been given, or (2) to detect notification procedures for pro forma as and Order, 13 FCC Rcd. 6293(1998).	hat prior Commission consent is not	
2) The Assignor or Transferor of incorporated by reference are in	ertifies that all statements naterial, are part of this ap	s made in this application and in the exhib oplication, and are true, complete, correct	oits, attachments, or in documents t, and made in good faith.	
79) Typed or Printed Name of P				
First Name: RICK	MI: D	Last Name: BAILEY	Suffix:	
80) Title: VICE PRESIDENT		<u> </u>		
Signature: RICK D BAILEY	***************************************	81) Date: 03/05/02		

## Assignee/Transferee Certification Statements

- 1) The Assignee or Transferee certifies either (1) that the authorization will not be assigned or that control of the license will not be transferred until the consent of the Federal Communications Commission has been given, or (2) that prior Commission consent is not required because the transaction is subject to streamlined notification procedures for pro forma assignments and transfers by telecommunications carriers See Memorandum Opinion and Order, 13 FCC Rcd. 6293 (1998).
- 2) The Assignee or Transferee waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application.
- 3) The Assignee or Transferee certifies that grant of this application would not cause the Assignee or Transferee to be in violation of any pertinent cross-ownership, attribution, or spectrum cap rule.\*

  If the applicant has sought a waiver of any such rule in connection with this application, it may make this certification subject to the
- outcome of the waiver request.
- 4) The Assignee or Transferee agrees to assume all obligations and abide by all conditions imposed on the Assignor or Transferor under the subject authorization(s), unless the Federal Communications Commission pursuant to a request made herein otherwise allows, except for liability for any act done by, or any right accured by, or any suit or proceeding had or commenced against the Assignor or Transferor prior to this assignment.
- 5) The Assignee or Transferee certifies that all statements made in this application and in the exhibits, attachments, or in documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.
- 6) The Assignee or Transferee certifies that neither it nor any other party to the application is subject to a denial of Federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1998, 21 U.S.C § 862, because of a conviction for possession or distribution of a controlled substance. See Section 1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification.
- 7) The applicant certifies that it either (1) has an updated Form 602 on file with the Commission, (2) is filing an updated Form 602 simultaneously with this application, or (3) is not required to file Form 602 under the Commission's Rules.

#### 82) Typed or Printed Name of Party Authorized to Sign

First Name: ARTHUR	MI: R	Last Name: BLOCK	Suffix:
83) Title: OFFICER			*
Signature: ARTHUR R BLOCK		84) Date: 03/05/02	
WILLFUL FALSE STATEMENTS MADE (IMPRISONMENT (U.S. Code, Title 18, See PERMIT (U.S. Code, Title 47, Section 31)	ection 1001) AND/OR	REVOCATION OF ANY STATION LIC	CENSE OR CONSTRUCTION

### Authorizations To Be Assigned or Transferred

85) Call Sign	86) Radio Service	87) Location Number	88) Path Number 89) Lower or (Microwave only) Frequency (	Center 90) Upper Frequency MHz) (MHz)	91) Constructed Yes / No
WPNJ714	AL				Yes
WMW441	AL				Yes
WMW442	AL	•			Yes
WPPW219	AL				Yes

FCC Form 603 Schedule A

# Schedule for Assignments of Authorization and Transfers of Control in Auctioned Services

Approved by OMB 3060 - 0800 See instructions for public burden estimate

#### Assignments of Authorization

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If 'Yes', the new category of eligibility of the licensee is:

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Transferee certifies that the answers provided in Item 4 are true and correct.

#### **Attachment List**

Attachment Type	Date	Description	Contents
Other	02/27/02	DESCRIPTION OF TRANSACTION/PUBLIC INTEREST STATEMENT	0177308850319848719189179.pdf

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING Approved by OMB FEDERAL COMMUNICATIONS COMMISSION 3060-0589 REMITTANCE ADVICE Page No 1 of 2 (1) LOCKBOX # 358994 FUO WINELLEN MAR 0 6 2002 SPECIAL USE FCC USE ONLY SECTION A - PAYER INFORMATION (2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) Cole, Raywid & Braverman, L.L. (3) TOTAL AMOUNT PAID (U.S. (4) STREET ADDRESS LINE NO. 1 1919 Pennsylvania Ave., N.W. \$225.00 (5) STREET ADDRESS LINE NO. 2 Suite 200 (6) CITY Washington (7) STATE (8) ZIP CODE (9) DAYTIME TELEPHONE NUMBER (include area code) DC 20006 (10) COUNTRY CODE (if not in U.S.A.) 202 - 6599750 US FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED (11) PAYER (FRN) (12) PAYER (TIN) 0003 78 7942 0520820071 IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) (13) APPLICANT NAME AT&T COMCAST CORPORATION (14) STREET ADDRESS LINE NO. 1 1500 MARKET STREET (15) STREET ADDRESS LINE NO. 2 (16) CITY **PHILADELPHIA** (17) STATE (18) ZIP CODE (19) DAYTIME TELEPHONE NUMBER (include area code) PΑ (20) COUNTRY CODE (if not in U.S.A.) 19102 (215) 981-7535 FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED (21) APPLICANT (FRN) (22) APPLICANT (TIN) 0006 32 9247 0270000798 COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET (23A) CALL SIGN/OTHER ID (24A) PAYMENT TYPE CODE (25A) QUANTITY WMW442 CAPM (26A) FEE DUE FOR (PTC) (27A) TOTAL FEE FCC USE ONLY \$50.00 \$50.00 (28A) FCC CODE I (29A) FCC CODE 2 0000788740 (23B) CALL SIGN/OTHER ID (24B) PAYMENT TYPE CODE WMW441 (25B) QUANTITY **CCPM** (26B) FEE DUE FOR (PTC) (27B) TOTAL FEE FCC USE ONLY \$75.00 (28B) FCC CODE 1 (29B) FCC CODE 2 0000788740 SECTION D - CERTIFICATION (30) CERTIFICATION STATEMENT , certify under penalty of perjury that the figregoing and supporting information is true and correct to the best of my knowledge, information and belief. SIGNATURE DATE SECTION E - CREDIT CARD PAYMENT INFORMATION (31)MASTERCARD/VISA ACCOUNT NUMBER: MASTERCARD EXPIRATION DATE: I hereby authorize the FCC to charge my VISA or MASTERCARD for the service(s)/authorization herein described. VISA SIGNATURE.

DATE

## FEDERAL COMMUNICATIONS COMMISSION

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SPECIAL USE			•	_	-
FCC USE ONLY		_		_	

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WPPW219			1.	A) PAYMENT TY ATM	YPE CODE	(25A) QL <b>1</b>	JANTITY			
	0.00	(27A) TOTAL FEE		\$50.00	FCC USE	ONLY				
(28A) FCC CODE 1		(29A) FCC CC	DE 2		****					0000788740
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23D) CALL SIGN/OTHER ID	3 1 747 <u>7</u> 7		(24D)	) PAYMENT TY	DE CODE	(25D) OI		( Comment		
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## COLE, RAYWID & BRAVERMAN, L.L.P.

VENDOR

FEDERAL COMMUNICATIONS

CHECK NO.

74544

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40401	030102	03/01/2002	225.00	225.00	0.00
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COLE, RAYWID & BRAVERMAN, L.L.P.

1919 PENNSYLVANIA AVE. N.W. WASHINGTON, DC 20006-3458 BANK OF AMERICA 02992 DC 15-120-540 74544

CHECK DATE

VENDOR NO.

03/01/2002

FCC

PAY

Two hundred twenty-five and NO/100

CHECK AMOUNT

225.00

TO THE ORDER OF

FEDERAL COMMUNICATIONS

**COMMISSION** 

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FEDERAL COMMUNICATIONS
COLE, RAYWID & BRAVERMAN, L.L.P.

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FCC 603	FCC Wireless Telecommunications Bureau Application for Assignments of Authorization and Transfers of Control	Approved by OMB 3060 - 0800 See instructions for public burden estimate
		Submitted 02/28/2002 at 04:41PM
		File Number: 0000790558

1) Application Purpose: Transfer of Contro
--------------------------------------------

2a) If this request is for an Amendment or Withdrawal, enter the File Number of the pending application currently on file with the FCC.

File Number:

2b) File numbers of related pending applications currently on file with the FCC:

#### Type of Transaction

3a) Is this a pro forma assignment of authorization or transfer of control? Yes

3b) If the answer to Item 3a is 'Yes', is this a notification of a pro forma transaction being filed under the Commission's forbearance procedures for telecommunications licenses? **No** 

4) For assignment of authorization only, is this a partition and/or disaggregation?

5a) Does this filing request a waiver of the Commission rules?

If 'Yes', attach an exhibit providing the rule numbers and explaining circumstances. No

5b) If a feeable waiver request is attached, multiply the number of stations (call signs) times the number of rule sections and enter the result.

6) Are attachments being filed with this application? Yes

7a) Does the transaction that is the subject of this application also involve transfer or assignment of other wireless licenses held by the assignor/transferor or affiliates of the assignor/transferor(e.g., parents, subsidiaries, or commonly controlled entities) that are not included on this form and for which Commission approval is required? **Yes** 

7b) Does the transaction that is the subject of this application also involve transfer or assignment of non-wireless licenses that are not included on this form and for which Commission approval is required? **Yes** 

#### Transaction Information

8) How will assignment of authorization or transfer of control be accomplished? Sale or other assignment or transfer of stock If required by applicable rule, attach as an exhibit a statement on how control is to be assigned or transferred, along with copies of any pertinent contracts, agreements, instruments, certified copies of Court Orders, etc.

9) The assignment of authorization or transfer of control of license is: Voluntary

#### Licensee/Assignor Information

10a) Taxpayer Identification Numbe	r: 411957148	10b) SGIN: 000	10c) FCC Registration Number (FRN): 0002621951
11) First Name (if individual):	MI:	Last Name:	Suffix:
12) Entity Name (if not an individual	): MIDCONTINE	IT COMMUNICATIO	ONS LICENSING
13) Attention To:		-	
14) P.O. Box: <b>5040</b>	And / Or	15) Street Address: 410 S. PHILLIPS AVENUE	
16) City: SIOUX FALLS		17) State: <b>SD</b>	18) Zip: <b>57117</b>
19) Telephone Number: (605)357-5	777	20) FAX:	
21) E-Mail Address:		-	

22) Race, Ethnicity, Gender of Assignor/Licensee (Optional)

Race:	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:		,	ŧ
Gender:	Female:	Male:			

## Transferor Information (for transfers of control only)

23a) Taxpayer Identification Number	:	23b) SGIN:	23c) FCC Registration Number (FRN): 0003470556
24) First Name (if individual):	MI:	Last Name:	Suffix:
25) Entity Name (if not an individual)	AT&T COF	₹P.	
26) P.O. Box:	And / Or	27) Street Address: 32 AVENUE OF THE AMERICAS	
28) City: NEW YORK		29) State: NY	30) Zip: 10013
31) Telephone Number: (212)387-40	00	32) FAX:	
33) E-Mail Address:			

# Name of Transferor Contact Representative (if other than Transferor) (for transfers of control only)

34) First Name: STEVEN	MI:	Last Name: HORVITZ	Suffix:
35) Company Name: COLE, F	RAYWID & BRA	VERMAN, LLP	
36) P.O. Box:	And / Or	37) Street Address: 1919 PENNS	YLVANIA AVENUE, NW., SUITE 200
38) City: WASHINGTON		39) State: DC	40) Zip: 20006
41) Telephone Number: (202)	659-9750	42) FAX:	
43) E-Mail Address:			
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## Assignee/Transferee Information

45a) Taxpayer Identification Number	er: 270000798	45b) SGIN: 000	45c) FCC Registration Number (FRN): 0006329247
46) First Name (if individual):	MI:	Last Name:	Suffix:
47) Entity Name (if other than indivi	dual): AT&T COM	CAST CORPORAT	ION
48) Name of Real Party in Interest:	F-2		49) TIN:
50) Attention To: THOMAS R. NATI	HAN		
51) P.O. Box:	And / Or	52) Street Addre	ss: 1500 MARKET STREET
53) City: PHILADELPHIA		54) State: PA	55) Zip. 19102
56) Telephone Number: (215)981-7	535	57) FAX:	
58) E-Mail Address:			

# Name of Assignee/Transferee Contact Representative (if other than Assignee/Transferee)

Suffix:
DEET NW CHITE CO.
DEET NW CHITCOO
KEE1, NYV., SUILE 820
65) Zip: 20006

# Alien Ownership Questions