VENDOR -

FEDERAL COMMUNICATIONS

CHECK NO.

74721

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

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

BANK OF AMERICA 02992 DC

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Security Features Included.

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TO THE ORDER OF

FEDERAL COMMUNICATIONS

COMMISSION

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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 12:33PM

File Number:
0000777145

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

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

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: 910787092	10b) SGIN: 000	10c) FCC Registration Number (FRN): 0001578038	
11) First Name (if individual): MI:		Last Name:	Suffix:	
12) Entity Name (if not an individua): TELE-VUE SYS	STEMS, INC.		
13) Attention To: STEPHEN FLESS	NER			
14) P.O. Box: 5630	And / Or	Or 15) Street Address:		
16) City: DENVER		17) State: CO	18) Zip: 80217	
19) Telephone Number: (720)267-2	700	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: 24) First Name (if individual): MI:		23b) SGIN:	23c) FCC Registration Number (FRN): 0003470556 Suffix:	
		Last Name:		
25) Entity Name (if not an individu	al): AT&T COF	RP.		
26) P.O. Box:	And / Or	27) Street Addr	ess: 32 AVENUE OF THE AMERICAS	
28) City: NEW YORK		29) State: NY	30) Zip: 10013	
31) Telephone Number: (212)387-4000		32) FAX:	The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon	
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 PENNSYLVANIA 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:				
		erre se summent i de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de		

Assignee/Transferee Information

45a) Taxpayer Identification Number	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:	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s		49) TIN:
50) Attention To: THOMAS R. NATI	HAN		
51) P.O. Box: And / Or		52) Street Address: 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)

59) First Name: RENEE MI:		Last Name: CALLAHAN	Suffix:	
60) Company Name: LAWLER,	METZGER & MILKN	IAN, LLC		
61) P.O. Box: And / Or 62) Street Address: 1909 K STREET, 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:				

Alien Ownership Questions

https://wtbwww05.fcc.gov/default.sph/Uls...link_to_print_Ahome_html__1141913___IA

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
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:	Native Hawaiian or Other Pacific Islander:	White:
	Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:		'
_	Gender:	Female:	Male:		

Assignor/Transferor Certification Statements

required because the transaction	ine Federal Communicati in is subject to streamline	authorization will not be assigned or the ons Commission has been given, or (2) d notification procedures for pro forma and Order, 13 FCC Rcd. 6293(1998).	\ that arise Communications .
 The Assignor or Transferor c incorporated by reference are m 	ertifies that all statements naterial, are part of this ap	made in this application and in the exh oplication, and are true, complete, corre	ibits, attachments, or in documents
79) Typed or Printed Name of P	arty Authorized to Sign		good later.
First Name: RICK	MI: D	Last Name: BAILEY	Suffix:
80) Title: VICE PRESIDENT	1.5.		

81) Date: 02/28/02

Assignee/Transferee Certification Statements

Signature: RICK D BAILEY

- 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 TI IMPRISONMENT (U.S. Code, Title 18, Section PERMIT (U.S. Code, Title 47, Section 312(a)(i 1001) AND/OR	REVOCATION OF ANY STATION LIC	ENCE OR CONCERNATION

Authorizations To Be Assigned or Transferred

85) Call Sign	86) Radio Service	87) Location Number	88) Path Number (Microwave only)	89) Lower or Center Frequency (MHz)	90) Upper Frequency (MHz)	91) Constructed Yes / No
WQP480	AL.			,	, (<u>-</u>)	Yes
WQP481	AL					
KVL362	AL					Yes
KVL363	AL					Yes
						Yes
KP9897	AL.					Yes
WNEH782	AL					Yes
WNPS244	AL				!	
WNZY861	AL]	Yes
***************************************	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:	
ļ	(05/10/11/				

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	0177284099593098122387864.pdf

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING FEDERAL COMMUNICATIONS COMMISSION REMITTANCE ADVICE SPECIAL USE (1) LOCKBOX # 358994 FCC USE ONLY トレン/語画LLM MAR 0.6 2002 **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. \$400.00 (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 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 KP9897 **PATM** 1 (26A) FEE DUE FOR (PTC) (27A) TOTAL FEE FCC USE ONLY \$50.00 \$50.00 (28A) FCC CODE I (29A) FCC CODE 2 0000777145 (23B) CALL SIGN/OTHER ID (24B) PAYMENT TYPE CODE (25B) QUANTITY **KVL362 PATM** (26B) FEE DUE FOR (PTC) (27B) TOTAL FEE FCC USE ONLY \$50.00 (28B) FCC CODE I (29B) FCC CODE 2 0000777145 SECTION D - CERTIFICATION (30) CERTIFICATION STATEMENT pregoing and supporting informationis true and correct to certify under p

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:

FEDERAL COMMUNICATIONS COMMISSION

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(13) APPLICANT NAME			ION BB - AI	DDI	TIONAL APPLIC	CANT	INFO	RMATIC	N		
AT&T COMCAST CO (14) STREET ADDRESS LIN	E NO. I	ION									
(15) STREET ADDRESS LIN											
	L NO. 2										
(16) CITY PHILADELPHIA									(17) STATE	(18) ZIP	ODE 19102
(19) DAYTIME TELEPHONE 2159817535	NUMBER (include	area code)	(20) COUNTRY COD	E (if n	ot in U.	S.A.)		<u> </u>	10102
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(26B) FEE DUE FOR (PTC)	\$50.00		TOTAL FEE		\$50.00		USE	ONLY		···	
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			<u> </u>	- jan			4000	10.5			0000777145
(23C) CALL SIGN/OTHER ID KVL363					(24C) PAYMENT T	PE CO	ODE	(25C) QUA	NTITY		
26C) FEE DUE FOR (PTC)	\$50.00		TOTAL FEE		\$50.00	FCC	USE (ONLY			
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	www.	State Carlo									0000777145
23D) CALL SIGN/OTHER ID WNEH782					24D) PAYMENT TY PATM	PE CC	DDE (25D) QUA	NTITY		
26D) FEE DUE FOR (PTC)		(27D)	TOTAL FEE		raim_	FCC	USE C	NI.Y			-
28D) FCC CODE I	\$50.00	<u></u>	T		\$50.00		000				
			(29D) FCC CO	DE	2						0000777145
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COLE, RAYWID & BRAVERMAN, L.L.P.

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

BANK OF AMERICA 02992 DC

CHECK NO.

CHECK DATE

VENDOR NO.

15-120-540

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03/06/2002

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PAY

Four hundred and NO/100

CHECK AMOUNT

400.00

TO THE ORDER OF

FEDERAL COMMUNICATIONS

COMMISSION

#*O74559#* #*O54001204#* 002086050069#

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

74559

74559

Security Features Included. [-D Details on back

40457

030602

03/06/2002

400.00

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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	er: 941272168	10b) SGIN: 000	10c) FCC Registration Number (FRN): 0001546910
11) First Name (if individual):	MI:	Last Name:	Suffix:
12) Entity Name (if not an individua): TELEVISION S	IGNAL CORPORA	TION
13) Attention To:			
14) P.O. Box: 5630	And / Or	15) Street Addre	iss:
16) City: Denver		17) State: CO	18) Zip: 80217
19) Telephone Number: (720)267-2	700	20) FAX:	
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:			
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 COI	RP.	
26) P.O. Box:	And / Or	27) Street Addr	ess: 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: STEVEN	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, NW., SUITE 200
38) City: WASHINGTON		39) State: DC	40) Zip: 20006
41) Telephone Number: (202)	659-9750	42) FAX:	
43) E-Mail Address:	NOTE THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON		

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 CON	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 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:			THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS O

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	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: 20006	
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)

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

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transferred until the consent of the I required because the transaction is	Federal Communicat 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 a and Order, 13 FCC Rcd. 6293(1998).	hat prior Commission consent is not			
		s made in this application and in the exhib pplication, and are true, complete, correct				
79) Typed or Printed Name of Party	Authorized to Sign					
First Name: RICK	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	<u> </u>	Suffix:
83) Title: OFFICER				er pri 1971 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 1972 - 19
Signature: ARTHUR R BLOCK		84) Date: 02/28/02		
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Authorizations To Be Assigned or Transferred

85) Call Sign	86) Radio Service	87) Location Number	88) Path Number (Microwave only) 89) Lower or Center (Microwave only)	90) Upper Frequency (MHz)	91) Constructed Yes / No
WNEW393	AL	•			Yes
WNER551	AL	•••			Yes
WNXZ871	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	0177284919989596096373455.pdf

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(5) STREET A										
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COLE, RAYWID & BRAVERMAN, L.L.P.

VENDOR

FEDERAL COMMUNICATIONS

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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. 74529

CHECK DATE

VENDOR NO.

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03/01/2002

FCC

PAY

One hundred fifty and NO/100

CHECK AMOUNT

150.00

TO THE ORDER OF

FEDERAL COMMUNICATIONS

COMMISSION

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

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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	r: 941517138	10b) SGIN: 000	10c) FCC Registration Number (FRN): 0001544733
11) First Name (if individual):	MI:	Last Name:	Suffix:
12) Entity Name (if not an individual)	: TELEVENTS, I	NC.	
13) Attention To: STEPHEN FLESSI	NER		
14) P.O. Box: 5630	And / Or	15) Street Addre	ss:
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)

Race:	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawailan 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:		23c) FCC Registration Number (FRN): 0003470556		
24) First Name (if individual): MI:		Suffix:		
ual): AT&T COF	₹P.			
And / Or	27) Street Address: 32 AVENUE OF THE AMERICAS			
	29) State: NY	30) Zip: 10013		
-4000	32) FAX:			
_	MI: ual): AT&T COF And / Or	MI: Last Name: ual): AT&T CORP. And / Or 27) Street Addr 29) State: NY		

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

ļΜi:	Last Name: HORVITZ	Suffix:
RAYWID & BRAY	VERMAN, LLP	<u> </u>
And / Or	37) Street Address: 1919 PENNSYI	LVANIA AVENUE, NW., SUITE 200
	39) State: DC	40) Zip: 20006
659-9750	42) FAX:	•
		39) State: DC

Assignee/Transferee Information

44) The Assignee is a(n): Corporat	tion		
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:			49) TIN:
50) Attention To: THOMAS R. NAT	HAN	THE REST CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO. LANS CO.	
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)

MI:	Last Name: CALLAHAN	Suffix:
R & MILKI	IAN, LLC	
And / Or	62) Street Address: 1909 K STREET, N	IW., SUITE 820
	64) State: DC	65) Zip: 20006
-	67) FAX:	
-		And / Or 62) Street Address: 1909 K STREET, N 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.	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:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:		
	Female:	Male:		

Assignor/Transferor Certification Statements

required because the transaction	ie Federal Communicati i is subject to streamline	authorization will not be assigned or that ions Commission has been given, or (2) to notification procedures for pro forma and order, 13 FCC Rcd. 6293(1998).	that prior Commission consent is not
The Assignor or Transferor ce incorporated by reference are ma	rtifies that all statements aterial, 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	H. (Belleman March March and Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Cont		•
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: BAILEY	Suffix:
83) Title: OFFICER			
Signature: ARTHUR R BAILEY	***************************************	84) Date: 02/28/02	
WILLFUL FALSE STATEMENTS MADE (IMPRISONMENT (U.S. Code, Title 18, September 19, Section 31)	ection 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	88) Path Number (Microwave only)	89) Lower or Center Frequency (MHz)	90) Upper Frequency (MHz)	91) Constructed Yes / No
KNIH332	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

i	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	0177284909727828142205412.pdf

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

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TO THE ORDER OF

FEDERAL COMMUNICATIONS

COMMISSION

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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 12:40PM

File Number:
0000777762

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

a) Is this a pro forma assignment of authorization or transfer of control? No	
b) If the answer to Item 3a is 'Yes', is this a notification of a pro forma transaction being filed under the Commission's forcedures for telecommunications licenses?	rbearance
For assignment of authorization only, is this a partition and/or disaggregation?	
a) Does this filing request a waiver of the Commission rules? 'Yes', attach an exhibit providing the rule numbers and explaining circumstances. No	
b) If a feeable waiver request is attached, multiply the number of stations (call signs) times the number of rule actions and enter the result.	
Are attachments being filed with this application? Yes	
) Does the transaction that in the cubicat of this application also in the transaction that in the cubicat of this application also in the transaction that in the cubicat of this application also in the transaction that in the cubicat of this application also in the transaction that in the cubicat of this application also in the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubicat of the cubic	~

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	: 591895795	10b) SGIN: 000	10c) FCC Registration Number (FRN): 0001811777
11) First Name (if individual):	MI:	Last Name:	Suffix:
12) Entity Name (if not an individual)	: TCI TKR OF SO	OUTH DADE, INC.	
13) Attention To: STEPHEN FLESS	NER	***************************************	
14) P.O. Box: 5630	And / Or	15) Street Addre	ss:
16) City: DENVER		17) State: CO	18) Zip: 80217
19) Telephone Number: (720)267-27	00	20) FAX:	
21) E-Mail Address:			A STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STA

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

	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other	Vhite:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:		,	
Gender:	Female:	Male:			
		<u> </u>			

Transferor Information (for transfers of control only)

23a) Taxpayer Identification Nu	mber:	23b) SGIN:	23c) FCC Registration Number (FRN): 0003470556
24) First Name (if individual):	MI:	Last Name:	Suffix:
25) Entity Name (if not an indivi	dual): AT&T CO	RP.	
26) P.O. Box:	And / Or	27) Street Addr	ess: 32 AVENUE OF THE AMERICAS
28) City: NEW YORK		29) State: NY	30) Zip: 10013
31) Telephone Number: (212)3	37-4000	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	Touris.
36) P.O. Box:	And / Or	37) Street Address: 1919 PENNSYL	VANIA AVENUE, NW., SUITE 200
38) City: WASHINGTON		39) State: DC	(40) Zip: 20006
41) Telephone Number: (202)	659-9750	42) FAX:	7-2
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:			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:	1
58) E-Mail Address:			

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

60) Company Name: LAWLER, ME	TZGER & MILKN	Last Name: CALLAHAN Suffix: AN, 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: 20006	
66) Telephone Number: (202)777-7	700	67) FAX:	1/	

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?	
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
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

required because the transaction	e Federal Communica is subject to streamling	authorization will not be assigned or that tions Commission has been given, or (2) ed notification procedures for <i>pro forma</i> a on and Order, 13 FCC Rcd. 6293(1998).	that arias Commission assess to
 The Assignor or Transferor cer incorporated by reference are ma 	tifies that all statement terial, are part of this a	is made in this application and in the exhi pplication, and are true, complete, correc	bits, attachments, or in documents
79) Typed or Printed Name of Pa	rty Authorized to Sign	production and another complete, confect	i, and made in good faith.
First Name: RICK	MI: D	Last Name: BAILEY	Suffix:
80) Title: VICE PRESIDENT			<u> </u>
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 IMPRISONMENT (U.S. Code, Title 18, Section 312).	tion 1001) AND/OR	REVOCATION OF ANY STATION LIC	TENSE OF CONSTRUCTION

Authorizations To Be Assigned or Transferred

85) Call Sign	86) Radio	87) Location	88) Path Number	89) Lower or Center	90) Upper Frequency	91) Constructed
	Service	Number	(Microwave only)	Frequency (MHz)	(MHz)	Yes / No
KNHQ725	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:
-				to the second of

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	0177284853264346607775764.pdf

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

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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 12:37PM	
		File Number: 0000777713	

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 Numb	er: 591864613	10b) SGIN: 000	10c) FCC Registration Number (FRN): 0004991865	
11) First Name (if individual): MI:		/li: Last Name:	Suffix:	
12) Entity Name (if not an individua	I): TCI TKR OF CE	ENTRAL FLORIDA,	INC.	
13) Attention To: STEPHEN FLES:				
14) P.O. Box: 5630	And / Or	15) Street Address:		
16) City: DENVER		17) State: CO	18) Zip: 80217	
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 individual):	AT&T COF	₹₽.	
26) P.O. Box:	And / Or	27) Street Addre	ess: 32 AVENUE OF THE AMERICAS
28) City: NEW YORK		29) State: NY	30) Zip: 10013
31) Telephone Number: (212)387-400)0	32) FAX:	
33) E-Mail Address:	~		

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

MI:	Last Name: HORVITZ	Suffix:	
RAYWID & BRA	VERMAN, LLP		
And / Or	37) Street Address: 1919 PENNSYLVANIA AVENUE, NW., SUITE 200		
	39) State: DC	40) Zip: 20006	
659-9750	42) FAX:		
	And / Or	And / Or 37) Street Address: 1919 PENNSY	

Assignee/Transferee Information

44) The Assignee is a(n): Corporat			
45a) Taxpayer Identification Number	r: 27 0000798	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 CON	ICAST CORPORAT	ION
48) Name of Real Party in Interest:		A	49) TIN:
50) Attention To: THOMAS R. NATH	IAN	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	
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)

60) Company Name: LAWLER, METZGER & MIL 61) P.O. Box: And / Or		• .
61) P.O. Box; And / Or		
	62) Street Address: 1909 K STREET, NW., SUITE 820	
63) City: WASHINGTON	64) State: DC	65) Zip: 20006
66) Telephone Number: (202)777-7700	67) FAX:	

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.	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:
Emilicity: Edispanic of Cando.		Not Hispanic or Latino:			
Gender:	Female:	Male:			

Assignor/Transferor Certification Statements

ederal Communicat subject to streamline	ions Commission has been given, or (2) t ed notification procedures for <i>pro forma</i> as	that prior Commission consent is not	
s that all statement al, 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 t, and made in good faith.	
MI: D	Last Name: BAILEY	Suffix:	
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	81) Date: 02/28/02		
i.	ederal Communicat subject to streamline emorandum Opinion es that all statement ial, are part of this ap Authorized to Sign	MI: D Last Name: BAILEY	

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		88) Path Number 89) Lower or Center (Microwave only) Frequency (MHz)	90) Upper Frequency (MHz)	91) Constructed Yes / No
KLN765	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 idisclose 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	0177284847866898149255394.pdf

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

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

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BANK OF AMERICA 02992 DC 15-120-540 74480

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TO THE ORDER OF

FEDERAL COMMUNICATIONS

COMMISSION

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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 12:34PM

File Number:
0000777641

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 Numb	er: 042980402	10b) SGIN: 000	10c) FCC Registration Number (FRN): 0003611985
11) First Name (if individual):	MI:	Last Name:	Suffix:
12) Entity Name (if not an individua	I): TCI PACIFIC C	OMMUNICATIONS.	INC.
13) Attention To: STEPHEN FLES:			
14) P.O. Box: 5630	And / Or	15) Street Addre	SS:
16) City: DENVER		17) State: CO	18) Zip: 80217
19) Telephone Number: (720)267-2	?700	20) FAX:	
21) E-Mail Address:			

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

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	ıal): AT&T COF	RP.	
26) P.O. Box:	And / Or	27) Street Addr	ess: 32 AVENUE OF THE AMERICAS
28) City: NEW YORK		29) State: NY	30) Zip: 10013
31) Telephone Number: (212)387	-4000	32) FAX:	The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon
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, R	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: 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. NATE	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)981-7	535	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	
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)7	77-7700	67) FAX:	
68) E-Mail Address:			

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
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 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 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	tifies that all statements terial, 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 Par	ty Authorized to Sign	- 1	
First Name: RICK	MI: D	Last Name: BAILEY	Suffix:
80) Title: VICE PRESIDENT			1
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, SopeRMIT (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	88) Path Number 89) Lower or Center (Microwave only) Frequency (MHz)	90) Upper Frequency (MHz)	91) Constructed Yes / No
KA96057	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

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	0177284803290234582958187.pdf

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