

17KES-02-F012A

READ INSTRUCTIONS CAREFULLY
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION
REMITTANCE ADVICE

Approved by OMB
3060-0589
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(1) LOCK BOX # 358315		SPECIAL USE ONLY	
		FCC USE ONLY	
SECTION A - PAYER INFORMATION			
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card) Matsushita Electric Corporation		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) \$50.00	
(4) STREET ADDRESS LINE NO. 1 One Panasonic Way, 4B-8			
(5) STREET ADDRESS LINE NO. 2			
(6) CITY Secaucus		(7) STATE NJ	(8) ZIP CODE 07094
(9) DAYTIME TELEPHONE NUMBER (include area code) 201 - 3487758		(10) COUNTRY CODE (if not in U.S.A.) US	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(11) PAYER (FRN) 0003762242			
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) COMPLETE SECTION BELOW FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(13) APPLICANT NAME Matsushita Electric Industrial Co Ltd			
(14) STREET ADDRESS LINE NO. 1 1006 Oaza Kadoma			
(15) STREET ADDRESS LINE NO. 2 €			
(16) CITY Kadoma Osaka 571		(17) STATE	(18) ZIP CODE
(19) DAYTIME TELEPHONE NUMBER (include area code) 201-348-7758		(20) COUNTRY CODE (if not in U.S.A.) JP	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(21) APPLICANT (FRN) 0007403131			
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(23A) CALL SIGN/OTHER ID	(24A) PAYMENT TYPE CODE EAC	(25A) QUANTITY 1	
(26A) FEE DUE FOR (PTC) \$50.00	(27A) TOTAL FEE \$50.00		
(28A) FCC CODE 1 ACJ927145L		(29A) FCC CODE 2 13EA408343	
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE	(25B) QUANTITY	
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE		
(28B) FCC CODE 1		(29B) FCC CODE 2	
SECTION D - CERTIFICATION			
CERTIFICATION STATEMENT I, <u>RICHARD MULLEN</u> , certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information and belief. SIGNATURE <u>Richard Mullen</u> DATE <u>October 29, 2003</u>			
SECTION E - CREDIT CARD PAYMENT INFORMATION			
MASTERCARD _____ VISA _____ AMEX _____ DISCOVER _____ ACCOUNT NUMBER _____ EXPIRATION DATE _____ I hereby authorize the FCC to charge my credit card for the service(s)/authorization herein described. SIGNATURE _____ DATE _____			

SEE PUBLIC BURDEN ON REVERSE

FCC FORM 159

FEBRUARY 2003 (REVISED)

MAILED TO FCC BANK ON 11/04/2003
UPLOADED TO FCC WEB SITE ON 11/18/2003

