



# Electronic Form 159



## Electronic Form 159

[Back](#) | [Print](#)

### Payment Confirmation

Your transaction has been approved. For your records, please note the following:

<b>AGENCY TRACKING ID:</b>	<b>PGC3001644</b>
<b>AUTHORIZATION NUMBER :</b>	<b>235548</b>
<b>AMOUNT PAID :</b>	<b>\$190.00</b>

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#### Customer Service

[FCC Fees](#)

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[FCC Home Page](#)

If you have any questions or concerns please contact your licensing system help desk.



# Fee Filer System



## Fee Filer System

[Main Menu](#) | Submission Confirmation

Logged in as FRN: BlueStone License Holdings Inc. (0010338895) [[Log Out](#)]

[Back](#) | [Print](#) | [Help](#)

## Submission Confirmation



You successfully filed your application fee obligation. The Remittance ID associated with this filing is **3002847**. Submitting fee information and paying fees are two separate actions. You have not yet paid your fee. Click Continue to pay online or print Form 159. If you choose to mail your payment to the FCC rather than pay online, you must print and include Form 159 with your payment.

**Total Amount: \$190.00**

CONTINUE

GENERATE REPORT

APP FEE MANAGER

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### Customer Service

[Frequently Asked Questions](#)

[Fee Filer Help](#)

[Filing Resources](#)

[Web Policies / Privacy Policy](#)

[Paperwork Reduction Act](#)

**Financial Operations Help Desk: (877) 480-3201, option 4 (Mon.-Fri. 8 a.m.-6:00 p.m. ET)**

Fee Filer has a dedicated staff of customer service representatives standing by to answer your questions or concerns. You can email us at [arinquies@fcc.gov](mailto:arinquies@fcc.gov).

# Agency Tracking ID:PGC3001644 Authorization Number:235548

## Successful Authorization -- Date Paid: 9/25/17

### FILE COPY ONLY!!

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING  (1) LOCKBOX #979089	FEDERAL COMMUNICATIONS COMMISSION <b>REMITTANCE ADVICE</b> <b>FORM 159</b> PAGE NO 1 OF 1	APPROVED BY OMB 3060-059 SPECIAL USE FCC USE ONLY
<b>SECTION A - Payer Information</b>		
(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) <b>Lerman Senter PLLC</b>		(3) TOTAL AMOUNT PAID (dollars and cents) <b>\$190.00</b>
(4) STREET ADDRESS LINE NO. 1 <b>Empire State Building</b>		
(5) STREET ADDRESS LINE NO. 2 <b>350 Fifth Avenue, Suite 5340</b>		
(6) CITY <b>New York</b>	(7) STATE <b>NY</b>	(8) ZIP CODE <b>10118</b>
(9) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) <b>212-7107771</b>		(10) COUNTRY CODE (IF NOT IN U.S.A.) <b>US</b>
<b>FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED</b>		
(11) PAYER (FRN) <b>0004054797</b>		(12) FCC USE ONLY
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 <b>BlueStone License Holdings Inc.</b>		
(14) STREET ADDRESS LINE NO. 1 <b>EMPIRE STATE BUILDING</b>		
(15) STREET ADDRESS LINE NO. 2 <b>350 FIFTH AVENUE, SUITE 5340</b>		
(16) CITY <b>NEW YORK</b>	(17) STATE <b>NY</b>	(18) ZIP CODE <b>10118</b>
(19) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) <b>+1 (212) 710-7771</b>		(20) COUNTRY CODE (IF NOT IN U.S.A.) <b>US</b>
<b>FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED</b>		
(21) APPLICANT (FRN) <b>0010338895</b>		(22) FCC USE ONLY
<b>COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET</b>		
(23A) FCC Call Sign/Other ID <b>KCFW-TV</b>	(24A) Payment Type Code(PTC) <b>MGT</b>	(25A) Quantity <b>1</b>
(26A) Fee Due for (PTC) <b>\$190.00</b>	(27A) Total Fee <b>\$190.00</b>	FCC Use Only
(28A) FCC CODE 1 <b>18079</b>	(29A) FCC CODE 2 <b>LMS0000030082</b>	
<b>SECTION B - Applicant Information</b>		
(23B) FCC Call Sign/Other ID	(24B) Payment Type Code(PTC)	(25B) Quantity
(26B) Fee Due for (PTC)	(27B) Total Fee	FCC Use Only
(28B) FCC CODE 1	(29B) FCC CODE 2	



**Online Payment****Step 3: Confirm Payment****1 | 2 |**

**Thank you.**  
**Your transaction has been successfully completed.**

**Pay.gov Tracking Information****Application Name:** Remittance Advice**Pay.gov Tracking ID:** 2651IVTM**Agency Tracking ID:** PGC3001644**Transaction Date and Time:** 09/25/2017 11:52 EDT**Payment Summary**

Address Information	Account Information	Payment Information
<b>Account Holder Name:</b> Paul A Cicelski Lerman Senter <b>Billing Address:</b> PLLC 2001 L Street, <b>Billing Address 2:</b> N.W. <b>City:</b> Washington <b>State / Province:</b> DC <b>Zip / Postal Code:</b> 20036 <b>Country:</b> USA	<b>Card Type:</b> American Express <b>Card Number:</b> *****2003	<b>Payment Amount:</b> \$190.00 <b>Transaction Date</b> 09/25/2017 11 <b>and Time:</b> EDT