

ORI

Applicant/Licensee Information

1) First Name (if individual):	MI:	Last Name:	Suffix:
2) Applicant Name (if entity):			
McCaw Communications of Gainesville, TX. LLC			

Related FCC Regulated Businesses of Applicant/Licensee

4a) Name and address of all FCC Regulated Businesses owned by Applicant/Licensee (use additional sheets, if necessary).	4b) Principal Business:	4c) TIN	4d) Percent of Interest Held
None			
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED JAN 19 2001 Licensing & Technical Analysis Branch </div>			

Signature

5) Typed or Printed Name of Party Authorized to Sign

First Name	MI	Last Name	Suffix
<u>David</u>	C	Jatlow	
Title			

Vice President

Signature: ,

Date: 1/11/01

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)

