FCC 603  
FCC Application for Assignments of Authorization and Transfers of Control:  
Main Form  
Wireless Telecommunications Bureau  
Public Safety and Homeland Security Bureau

General Information

<table>
<thead>
<tr>
<th>1) Application Purpose</th>
<th>TC</th>
</tr>
</thead>
<tbody>
<tr>
<td>AA - Assignment of Authorization</td>
<td>AM - Amendment</td>
</tr>
<tr>
<td>NT - Required Notification (For Consummation of an Assignment or Transfer)</td>
<td>EX - Request for Extension of Time (To Consummate an Assignment or Transfer)</td>
</tr>
</tbody>
</table>

2) If this application is for an Amendment (AM) or Withdrawal (WD), enter the File Number of the pending or consented to application currently on file with the FCC.

3a) Is this application for Assignment of Authorization or Transfer of Control part of a series of applications involving other wireless license(s) held by the licensee, affiliates of the licensee (e.g., parents, subsidiaries, or commonly-controlled entities), or third parties that are not included on this application and for which Commission approval or notification is required?  
   (Y) Yes  (N) No

3b) If the answer to 3a is 'Y', provide the File Number of the lead application.

3c) Does this application for Assignment of Authorization or Transfer of Control involve the assignment or transfer of non-wireless licenses/authorizations for which Commission approval or notification is required?  
   (Y) Yes  (N) No

4) Are attachments being filed with this application?  
   (Y) Yes  (N) No

Fees and Waivers

5a) Is the applicant exempt from FCC application fees?  
   (N) Yes  (N) No

   If 'Y', attach an exhibit justifying how the applicant is exempt from FCC application fees.

5b) Is a waiver/deferral of the FCC application fees being requested and the application fees are not being submitted in conjunction with this application?  
   (N) Yes  (N) No

   If 'Y', attach a date-stamped copy of the request for waiver/deferral of the FCC application fees.

6a) Does this application include a request for waiver of the Commission's rules (other than a request for application fee waivers)?  
   (N) Yes  (N) No

   If 'Y', attach an exhibit specifying the rule section(s) for which a waiver is being requested and including a justification for the waiver request.

6b) If 6a is 'Y', enter the number of rule sections involved.  
   Number of Rule Sections:      

Additional Transaction Information

7) Has this application for Assignment of Authorization or Transfer of Control already occurred?  
   (N) Yes  (N) No

8a) The Assignment of Authorization or Transfer of Control is:  
   (X) Voluntary  ( ) Involuntary

8b) If 8a is 'Involuntary', provide the date that the event occurred:  
   (MM/DD/YYYY)     /    /    

9a) Is this application a pro forma Assignment of Authorization or Transfer of Control?  
   (N) Yes  (N) No

9b) If 9a is 'Y', is this a post notification that is being filed under the Commission's forbearance procedures pursuant to Section 1.948(c)(1) of the Commission's Rules?  
   ( ) Yes  (N) No

9c) If 9b is 'Y', provide the consummation date of the Assignment of Authorization or Transfer of Control.  
   (MM/DD/YYYY)     /    /    

10a) Does this application involve the partitioning and/or disaggregation of geographic-area licenses?  
   ( ) Yes  (N) No

   If 'Y', complete Schedule B and, if applicable, Schedule C.

10b) If 10a is 'N', does this application involve the partial assignment of site-based licenses?  
   ( ) Yes  (N) No
11) How will/has the Assignment of Authorization or Transfer of Control be/been accomplished? Select One: (  )

- Sale or other assignment of assets
- Court order
- Reorganization or liquidation
- Transfer of stock or other ownership interests
- Other (voting trust agreement, management contract, etc.): ________________________________

**Designated Entity Information** (If 12a, 12b or 12c is ‘Y’, Schedule A is required to be completed.)

<table>
<thead>
<tr>
<th>Question</th>
<th>( ) Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>12a) Does this application for Assignment of Authorization or Transfer of Control involve any licenses that were originally awarded with bidding credits within the last five years?</td>
<td>( )</td>
<td></td>
</tr>
<tr>
<td>12b) Does this application for Assignment of Authorization or Transfer of Control involve any licenses that were originally subject to the Commission’s installment payment plan?</td>
<td>( )</td>
<td></td>
</tr>
<tr>
<td>12c) Does this application for Assignment of Authorization or Transfer of Control involve any licenses that were originally granted pursuant to closed bidding within the last five years?</td>
<td>( )</td>
<td></td>
</tr>
</tbody>
</table>

**Competition-Related Information**

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<thead>
<tr>
<th>Question</th>
<th>( ) Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>13) Does this application for Assignment of Authorization or Transfer of Control involve a license(s) that may be used for interconnected mobile voice and/or data services that would, if assigned or transferred, create a geographic overlap with another license(s) in which the Assignee/Transferee already holds direct or indirect interests (of 10 percent or more), either as a licensee or spectrum lessee/sublessee, and that also could be used to provide interconnected mobile voice and/or data services?</td>
<td>( )</td>
<td></td>
</tr>
<tr>
<td>14a) Does the Assignee/Transferee hold direct or indirect interests (of 10 percent or more) in any entity that already has access to 10 MHz or more spectrum in the Cellular Radiotelephone, broadband PCS, or Specialized Mobile Radio (SMR) services through license(s), lease(s), or sublease(s) in the same geographic area?</td>
<td>( )</td>
<td></td>
</tr>
<tr>
<td>14b) Would/does this application for Assignment of Authorization or Transfer of Control reduce the number of entities providing service (using spectrum in any of the three services listed in item 14a) in the affected market(s)?</td>
<td>( )</td>
<td></td>
</tr>
</tbody>
</table>

**Broadband Radio Service and Educational Broadband Service Information**

<table>
<thead>
<tr>
<th>Question</th>
<th>( ) Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>15a) Will the requested facilities be used to provide multichannel video programming?</td>
<td>( )</td>
<td></td>
</tr>
<tr>
<td>15b) If 15a is ‘Y’, does the Assignee/Transferee operate, control or have attributable interest (as defined in Section 27.1202 of the Commission’s Rules) in a cable television system whose franchise area is located within the geographic area of the requested facilities?</td>
<td>( )</td>
<td></td>
</tr>
</tbody>
</table>
| If ‘Y’, provide an exhibit explaining how the Assignee/Transferee complies with Section 27.1202 of the Commission’s Rules or justifying a waiver of that rule. If a waiver of the Commission’s Rule(s) is being requested, 6a must be answered ‘Y’.
| | ( )    |    |
| 16) Does the Assignee/Transferee comply with the programming requirements contained in Section 27.1203 of the Commission’s Rules? | ( )    |    |
| If ‘N’, provide an exhibit explaining how the Assignee/Transferee complies with Section 27.1203 of the Commission’s Rules or justifying a waiver of that rule. If a waiver of the Commission’s Rule(s) is being requested, 6a must be answered ‘Y’.
| | ( )    |    |
### Assignor/Licensee Information

17) Assignor/Licensee is a(n): (Select One)

- [ ] Individual
- [ ] Unincorporated Association
- [ ] Trust
- [ ] Government Entity
- [X] Corporation
- [ ] Limited Liability Company
- [ ] General Partnership
- [ ] Limited Partnership
- [ ] Limited Liability Partnership
- [ ] Consortium
- [ ] Other: ______________________________________________________

18) FCC Registration Number (FRN): 0001562040

19) First Name (if individual): MI: Last Name: Suffix:

20) Legal Entity Name (if not an individual): Baue Communications of Beaumont, Inc.

21) Attention To: Tony Wolk

22) P.O. Box: And/Or 23) Street Address: 3349 Route 138, Bldg. A


27) Telephone Number: (732)556-2200 28) Fax Number: (732)556-2245

29) E-Mail Address:

### Demographics of Assignor/Licensee (Optional):

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

### Assignor/Licensee Contact Representative

31) First Name: Jonathan MI: V Last Name: Cohen Suffix:

32) Company Name: Wilkinson Barker Knauer, LLP

33) Attention To:

34) P.O. Box: And/Or 35) Street Address: 2300 N Street, NW, Suite 700


39) Telephone Number: (202)783-4141 40) Fax Number: (202)783-5851

41) E-Mail Address: joncohen@wbklaw.com
Transferor Information (for Transfers of Control only)

42) Transferor is a(n): (Select One)

- [ ] Individual
- [ ] Unincorporated Association
- [ ] Trust
- [X] Government Entity
- [ ] Corporation
- [ ] Limited Liability Company
- [ ] General Partnership
- [ ] Limited Partnership
- [ ] Limited Liability Partnership
- [ ] Consortium
- [ ] Other: ______________________________________________________

43) FCC Registration Number (FRN): ____________________________

44) First Name (if individual): ____________________________ MI: ____________________________ Last Name: ____________________________ Suffix: ____________________________

45) Legal Entity Name (if not an individual): @transInfo.getEntityName

46) Attention To: ____________________________

47) P.O. Box: ____________________________ And

48) Street Address: ____________________________

49) City: ____________________________ State: ____________________________ Zip Code: 07719

50) Telephone Number: ____________________________

51) Fax Number: ____________________________

52) E-Mail Address: ____________________________

53) Phone Number: ____________________________

54) Fax Number: ____________________________

55) Demographics of Transferor (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:
  - [ ] Male
  - [ ] Female

Transferor Contact Representative

56) First Name: Jonathan MI: V Last Name: Cohen Suffix: ____________________________

57) Company Name: Wilkinson Barker Knauer, LLP

58) Attention To: ____________________________

59) P.O. Box: ____________________________ And

60) Street Address: 2300 N Street, NW, Suite 700


62) Telephone Number: (202)783-4141

63) Fax Number: (202)783-5851

64) E-Mail Address: joncohen@wbklaw.com
**Assignee/Transferee Information**

67) Assignee/Transferee is a(n): (Select One)

- Individual
- Unincorporated Association
- Trust
- Government Entity
- Corporation
- Limited Liability Company
- General Partnership
- Limited Partnership
- Limited Liability Partnership
- Consortium
- Other: ______________________________________________________

68) FCC Registration Number (FRN): 0005193701

69) First Name (if individual): MI: Last Name: Suffix:

70) Legal Entity Name (if not an individual): AT&T Inc.

71) Attention To: William R. Drexel

72) Real Party in Interest FCC Registration Number (FRN): 0005193701

73) Name of Real Party in Interest: AT&T Inc.

74) P.O. Box: And /Or 75) Street Address: 1010 N. St. Mary’s, Room 14T

76) City: San Antonio And /Or 77) State: TX 78) Zip Code: 78215

79) Telephone Number: (210)351-5360 80) Fax Number: (210)246-8905

81) E-Mail Address: william.drexel@att.com

**Demographics of Assignee/Transferee (Optional):**

<table>
<thead>
<tr>
<th>Race:</th>
<th>Ethnicity:</th>
<th>Gender:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ American Indian or Alaska Native</td>
<td>☐ Hispanic or Latino</td>
<td>☐ Male</td>
</tr>
<tr>
<td>☐ Asian</td>
<td>☐ Not Hispanic or Latino</td>
<td>☐ Female</td>
</tr>
<tr>
<td>☐ Black or African-American</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>☐ Native Hawaiian or Other Pacific Islander</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>☐ White</td>
<td>☐</td>
<td></td>
</tr>
</tbody>
</table>

**Assignee/Transferee Contact Representative (if other than Assignee/Transferee)**

83) First Name: William MI: R Last Name: Drexel Suffix:

84) Company Name: AT&T Inc.

85) Attention To:

86) P.O. Box: And /Or 87) Street Address: 1010 N. St. Mary’s, Room 14T

88) City: San Antonio And /Or 89) State: TX 90) Zip Code: 78215

91) Telephone Number: (210)351-5360 92) Fax Number: (210)246-8905

93) E-Mail Address: william.drexel@att.com
### Ownership Disclosure Information

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>94a) Is the Assignee/Transferee required to file FCC Form 602, Ownership Disclosure Information for the Wireless Telecommunications Services?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>94b) If 94a is ‘Y’, provide the File Number of the FCC Form 602 that is required to be submitted in conjunction with this application or already on file with the FCC.</td>
<td>0003656743</td>
<td></td>
</tr>
</tbody>
</table>

### Alien Ownership Information

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>95) Is the Assignee/Transferee a foreign government or the representative of any foreign government?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>96) Is the Assignee/Transferee an alien or the representative of an alien?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>97) Is the Assignee/Transferee a corporation organized under the laws of any foreign government?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>98) Is the Assignee/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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>99a) Is the Assignee/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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>99b) If 99a is ‘Y’, has the Assignee/Transferee received a ruling(s) under Section 310(b)(4) of the Communications Act with respect to the same radio service(s) and geographic coverage area(s) involved in this application?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If 99b is ‘N’, attach a date-stamped copy of a request for a foreign ownership ruling pursuant to Section 310(b)(4) of the Communications Act.

### Basic Qualification Information

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>100) Has the Assignee/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, or construction permit denied by the Commission?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>101) Has the Assignee/Transferee or any party to this application, or any party directly or indirectly controlling the Assignee/Transferee ever been convicted of a felony by any state or federal court?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>102) Has any court finally adjudged the Assignee/Transferee, or any party directly or indirectly controlling the Assignee/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?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Assignor/Transferor Certification Statements

1) The Assignor/Transferor certifies either that (1) the authorization will not be assigned or that control of the license(s) will not be transferred until the consent of the Federal Communications Commission has been given, or (2) 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 Section 1.948(c)(1) of the Commission’s Rules.

2) The Assignor/Transferor certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.

3) The Assignor/Transferor certifies that it is not in default on any payment for Commission licenses and that it is not delinquent on any non-tax debt owed to any federal agency.

Typed or Printed Name of Party Authorized to Sign

<table>
<thead>
<tr>
<th>103) First Name:</th>
<th>104) Title:</th>
<th>Last Name:</th>
<th>105) Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tony</td>
<td>Sr. VP, General Counsel &amp; Secretary</td>
<td>Wolk</td>
<td>11/21/2008</td>
</tr>
</tbody>
</table>

Signature: Tony L. Wolk

FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID.

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).
Assignee/Transferee Certification Statements

1) The Assignee/Transferee certifies either that (1) the authorization(s) will not be assigned or that control of the license(s) will not be transferred until the consent of the Federal Communications Commission has been given, or (2) 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 Section 1.948(c)(1) of the Commission's Rules.

2) The Assignee/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/Transferee certifies that grant of this application would not cause the Assignee or Transferee to be in violation of any pertinent cross-ownership or attribution rules.*
   *If the Assignee/Transferee 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/Transferee agrees to assume all obligations and abide by all conditions imposed on the Assignor/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 accrued by, or any suit or proceeding had or commenced against the Assignor/Transferor prior to this assignment/transfer.

5) The Assignee/Transferee certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.

6) The Assignee/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 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. See Section 1.2002(b) of the Commission’s Rules for the definition of “party to the application” as used in this certification.

7) The Assignee/Transferee certifies that it is not in default on any payment for Commission licenses and that it is not delinquent on any non-tax debt owed to any federal agency.

Typed or Printed Name of Party Authorized to Sign

<table>
<thead>
<tr>
<th>106) First Name:</th>
<th>MI:</th>
<th>Last Name:</th>
<th>Suffix:</th>
</tr>
</thead>
<tbody>
<tr>
<td>William</td>
<td>R</td>
<td>Drexel</td>
<td></td>
</tr>
</tbody>
</table>

107) Title: Sr. VP & Assistant General Counsel

Signature: William R Drexel

108) Date: 11/21/2008

FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID.

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 REVOCAUTION 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

<table>
<thead>
<tr>
<th>108) Call Sign</th>
<th>109) Radio Service Code</th>
<th>110) Location Number (Microwave only)</th>
<th>111) Path Number (Microwave only)</th>
<th>112) Frequency Number</th>
<th>113) Lower or Center Frequency (MHz)</th>
<th>114) Upper Frequency (MHz)</th>
<th>115) Constructed</th>
<th>Yes / No</th>
</tr>
</thead>
<tbody>
<tr>
<td>KNKA454</td>
<td>CL - Cellular</td>
<td></td>
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<td></td>
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<td></td>
<td>Y</td>
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<tr>
<td>WLR591</td>
<td>CF - Common Carrier Fixed Point to Point Microwave</td>
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<td></td>
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<td>Y</td>
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<tr>
<td>WLR595</td>
<td>CF - Common Carrier Fixed Point to Point Microwave</td>
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<tr>
<td>Type</td>
<td>Description</td>
<td>Date Entered</td>
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<td>O</td>
<td>Exhibit 1 - Public Interest Statement</td>
<td>11/21/2008</td>
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<tr>
<td>O</td>
<td>Appendix A: Spectrum Aggregation Chart</td>
<td>11/21/2008</td>
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<tr>
<td>O</td>
<td>Appendix B: Competitors Chart</td>
<td>11/21/2008</td>
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<tr>
<td>O</td>
<td>Declaration of Rick L. Moore</td>
<td>11/21/2008</td>
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<tr>
<td>O</td>
<td>Declaration of David A. Christopher</td>
<td>11/21/2008</td>
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<tr>
<td>O</td>
<td>Declaration of José J. Dávila</td>
<td>11/21/2008</td>
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<tr>
<td>O</td>
<td>Declaration of Francis P. Hunt</td>
<td>11/21/2008</td>
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<tr>
<td>O</td>
<td>Declaration of Willig/Orszag/Poulsen</td>
<td>11/21/2008</td>
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<tr>
<td>O</td>
<td>Exhibit 2 - Statement of No Environmental Impact</td>
<td>11/21/2008</td>
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</table>