

POCKET FILE COPY ORIGINAL

<b>FCC 603</b>	<b>FCC Wireless Telecommunications Bureau</b> <b>Application for Assignments of Authorization</b> <b>Application and Transfers of Control</b> <b>and Transfers of Control</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate See instructions for public burden estimate
		Submitted 11/06/2002 at 03:54PM
		File Number: <b>0001056342</b>

1) Application Purpose: <b>Amendment</b>	
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: <b>0001056342</b>
2b) File numbers of related pending applications currently on file with the FCC:	

**Type of Transaction**

3a) Is this a <i>pro forma</i> assignment of authorization or transfer of control? <b>Yes</b>
3b) If the answer to Item 3a is 'Yes', is this a notification of a <i>pro forma</i> transaction being filed under the Commission's forbearance procedures for telecommunications licenses? <b>No</b>
4) For assignment of authorization only, is this a partition and/or disaggregation? <b>Yes</b>
5a) Does this filing request a waiver of the Commission rules? <b>Yes</b> If 'Yes', attach an exhibit providing the rule numbers and explaining circumstances. <b>Yes</b>
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. <b>1</b>
6) Are attachments being filed with this application? <b>Yes</b>
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? <b>Yes</b>
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? <b>No</b>

8) How will assignment of authorization or transfer of control be accomplished? See Exhibit A. 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: <b>Voluntary</b>

**Licensee/Assignor Information**

10) FCC Registration Number (FRN): <b>0003291192</b>			
11) First Name (if individual):	MI:	Last Name:	Suffix:
12) Entity Name (if not an individual): <b>AT&amp;T Wireless PCS, LLC</b>			
13) Attention To: <b>David C. Jatlow, Vice President, RA</b>			
14) P.O. Box:	And / Or	15) Street Address: <b>1150 Connecticut Ave, NW, 4th Floor</b>	
16) City: <b>Washington</b>		17) State: <b>DC</b>	18) Zip Code: <b>20036</b>
19) Telephone Number: <b>(202)223-9222</b>		20) FAX Number: <b>(202)223-9095</b>	
21) E-Mail Address: <b>david.jatlow@attws.com</b>			

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

<b>Race:</b>	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
<b>Ethnicity:</b>	Hispanic or Latino:	Not Hispanic or Latino:			
<b>Gender:</b>	Female:	Male:			

**Transferor Information (for transfers of control only)**

23) FCC Registration Number (FRN):			
24) First Name (if individual):	MI:	Last Name:	Suffix:
25) Entity Name (if not an individual):			
26) P.O. Box:	And / Or	27) Street Address:	
28) City:	29) State:	30) Zip Code:	
31) Telephone Number:	32) FAX Number:		
33) E-Mail Address:			

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

34) First Name:	MI:	Last Name:	Suffix:
35) Company Name:			
36) P.O. Box:	And / Or	37) Street Address:	
38) City:	39) State:	40) Zip Code:	
41) Telephone Number:	42) FAX Number:		
43) E-Mail Address:			

**Assignee/Transferee Information**

44) The Assignee is a(n): Limited Liability Corporation			
45) FCC Registration Number (FRN): 0007536998			
46) First Name (if individual):	MI:	Last Name:	Suffix:
47) Entity Name (if other than individual): AT&T Wireless Roadrunner License Sub, LLC			
48) Name of Real Party in Interest:			49) TIN:
50) Attention To: David C. Jatlow, Vice President, RA			
51) P.O. Box:	And / Or	52) Street Address: 1150 Connecticut Ave, NW, 4th Floor	
53) City: Washington	54) State: DC	55) Zip Code: 20036	
56) Telephone Number: (202)223-9222	57) FAX Number: (202)223-9095		
58) E-Mail Address: david.jatlow@attws.com			

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

59) First Name:	MI:	Last Name:	Suffix:
60) Company Name:			
61) P.O. Box:	And / Or	62) Street Address:	
63) City:	64) State:	65) Zip Code:	
66) Telephone Number:	67) FAX Number:		
68) E-Mail Address:			

**Alien Ownership Questions**

66) 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 zed under the	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.	Yes

**78) Race, Ethnicity, Gender of Assignee/Transferee (Optional)**

<b>Race:</b>	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
<b>Ethnicity:</b>	Hispanic or Latino:	Not Hispanic or Latino:			
<b>Gender:</b>	Female:	Male:			

**Assignor/Transferor Certification Statements**

1) The Assignor or Transferor 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 <i>forma</i> assignments and transfers by telecommunications carriers. See Memorandum Opinion and Order, 13 FCC Rcd. 6293(1998).	
2) The Assignor or Transferor 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.	
79) Typed or Printed Name of Party Authorized to Sign	
First Name: Douglas	MI: I Last Name: Brandon Suffix:
80) Title: Vice President	
Signature: Douglas I Brandon	81) Date: 11/06/02

**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 accrued 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: <b>Douglas</b>	MI: <b>I</b>	Last Name: <b>Brandon</b>	Suffix:
83) Title: <b>Vice President</b>			
Signature: <b>Douglas I Brandon</b>		84) Date: <b>11/06/02</b>	
<b>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).</b>			

**Authorizations To Be Assigned or Transferred**

85) Call Sign	86) Radio Service	87) Location Number	88) Path Number (Microwave only)	89) Frequency Number	90) Lower or Center Frequency (MHz)	91) Upper Frequency (MHz)	92) Constructed Yes / No
KNLG464	AL						
KNLG534	AL						
KNLG538	AL						
KNLF253	AL						
KNLF278	AL						
KNLG428	AL						
KNLF216	AL						
KNLG564	AL						
KNLG505	AL						
KNLG411	AL						
KNLG545	AL						
KNLH670	AL						
KNLF289	AL						
KNLH721	AL						
KNLG540	AL						
WPOI214	AL						
KNLH694	AL						
KNLG437	AL						
KNLG522	AL						
KNLG521	AL						

<b>FCC Form 603 Schedule A</b>	<b>Schedule for Assignments of Authorization and Transfers of Control in Auctioned Services</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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**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)? **No**

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:
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**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.

<p><b>FCC Form 603 Schedule B</b></p>	<p><b>Partition and Disaggregation Schedule</b></p>	<p>Approved by OMB 3060 - 0800 See instructions for public burden estimate</p>
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1) Partitioner/Disaggregator Call Sign: **KNLG411**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
HWA110	Schedule C # Attached:	---

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Coverage Requirements -Partitioning**

<b>(No)</b> Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
<b>(Yes)</b> Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 den estimate
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1) Partitioner/Disaggregator Call Sign: **KNLG411**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWC110</b>	Schedule C # Attached:	<b>14150</b>

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Coverage Requirements - Partitioning**

(No) Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(Yes) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLG428**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned <b>HWY142</b>	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment) Schedule C # Attached:	4) Population of Partitioned Area <b>38800</b>
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**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Geographic Area Partitioning**

(No) Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(Yes) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggrantee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(Yes) Option 2	Disaggregator and Disaggrantee each certify that the Disaggratee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disaggratee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLF253**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment) Schedule C # Attached:	4) Population of Partitioned Area
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**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Coverage Requirements - Partitioning**

(Yes) Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(No) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(Yes) Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLF253**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWY347</b>	Schedule C # Attached:	<b>10802</b>

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency
<b>01855.00000</b>	<b>01860.00000</b>
<b>01935.00000</b>	<b>01940.00000</b>

**6) Coverage Requirements - Partitioning**

(Yes) Option 1	Partitioner and Partitioneer each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(No) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitioneer certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(Yes) Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLF253**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWY362</b>	Schedule C # Attached:	<b>407</b>

**5) Spectrum Disaggregated (in MHz)**

Lower Frequency	Upper Frequency
<b>01860.00000</b>	<b>01865.00000</b>
<b>01940.00000</b>	<b>01945.00000</b>

**6) Coverage Requirements - Partitioning**

<b>(Yes)</b> Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
<b>(No)</b> Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

<b>(No)</b> Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(No)</b> Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(Yes)</b> Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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<b>1) Partitioner/Disaggregator Call Sign: KNLF253</b>
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**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWY447</b>	Schedule C # Attached:	<b>1407</b>

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency
<b>01850.00000</b>	<b>01855.00000</b>
<b>01930.00000</b>	<b>01935.00000</b>

**6) Coverage Requirements - Partitioning**

(Yes) Option 1	Partitioner and Partionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(No) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(Yes) /Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLF253**

2) Defined Area to be	3) Undefined Area to be Partitioned(Complete undefined	4) Population of Partitioned Area
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**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency
<b>01860.00000</b>	<b>01865.00000</b>
<b>01940.00000</b>	<b>01945.00000</b>

**6) Coverage Requirements -Partitioning**

(Yes) Option 1	Partitioner and Partionee each certify that they will be subject to the same mverage requirementsfor their respective partitioned areas.
(No) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(Yes) Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLF278**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWY162</b>	Schedule C # Attached:	<b>31341</b>

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency
<b>01880.00000</b>	<b>01885.00000</b>
<b>01960.00000</b>	<b>01965.00000</b>

**6) Coverage Requirements - Partitioning**

<b>(Yes)</b> Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
<b>(No)</b> Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

<b>(No)</b> Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(No)</b> Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(Yes)</b> Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLF278**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWY244</b>	Schedule C # Attached:	<b>104393</b>

**5) Spectrum Disaggregated (in MHz)**

<b>Spectrum Disaggregated</b>	
Lower Frequency	/Upper Frequency
<b>01870.00000</b>	<b>01875.00000</b>
<b>01950.00000</b>	<b>01955.00000</b>

**6) Coverage Requirements - Partitioning**

<b>(Yes)</b> Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
<b>(No)</b> Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

<b>(No)</b> Option 1	Disaggregator and Disagregatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area
<b>(No)</b> Option 2	Disaggregator and Disagregatee each certify that the Disagregatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(Yes)</b> Option 3	Disaggregator and Disagregatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0200 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLG437**

<b>HWY168</b>	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment) <b>Schedule C # Attached:</b>	4) Population of Partitioned Area <b>689</b>
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**5) Spectrum Disaggregated (in MHz)**

<b>Spectrum Disaggregated</b>	
Lower Frequency	/Upper Frequency

**6) Coverage Requirements - Partitioning**

<b>(No)</b> Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
<b>(Yes)</b> Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggregatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggregatee each certify that the Disaggregatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disaggregatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLH670**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWY172</b>	Schedule C # Attached:	<b>256</b>

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Coverage Requirements - Partitioning**

(No) Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(Yes) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggregatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggregatee each certify that the Disaggregatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disaggregatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLG464**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
HWY245	Schedule C # Attached:	27783

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) g c - Partitioning**

(No)	Partitioner and Partitioneer each certiv that they will be subject to the same coverage requirements for their respective
(Yes) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitioneer certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) g iii - Disaggregation**

(No) Option 1	Disaggregator and Disaggragatee each certify that they will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLG521**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
HWY365	Schedule C # Attached:	14861

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Coverage Requirements -Partitioning**

(No) Option 1	Partitioner and Partitioneer each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(Yes) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitioneer certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator wiii maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLG522**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWY366</b>	Schedule C # Attached:	<b>15426</b>

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Coverage Requirements - Partitioning**

(No) Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(Yes) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLG538**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned <b>HWY399</b>	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment) Schedule C # Attached:	4) Population of Partitioned Area <b>16453</b>
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**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated,	
Lower Frequency	Upper Frequency

**6) Coverage Requirements - Partitioning**

(No) Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(No) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term...

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLH694**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned <b>HWY391</b>	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment) Schedule C # Attached:	4) Population of Partitioned Area <b>2119</b>
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**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Coverage Requirements - Partitioning**

(No) Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(No) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term...

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disagregatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disagregatee each certify that the Disagregatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disagregatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLG534**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWY392</b>	Schedule C # Attached:	<b>53536</b>

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Coverage Requirements - Partitioning**

(No) Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(Yes) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disagregatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disagregatee each certify that the Disagregatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disagregatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLF289**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
HWY167	Schedule C # Attached:	41258

Lower Frequency	Upper Frequency
01850.00000	01855.00000
01930.00000	01935.00000

**6) Coverage Requirements - Partitioning**

(Yes) Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(No) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(Yes) Option 3	Disaggregator and Disaggragatee certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLF289**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
HWY256	Schedule C # Attached:	154375

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency
01850.00000	01855.00000
01930.00000	01935.00000

**6) Coverage Requirements - Partitioning**

<b>(Yes)</b> Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
<b>(No)</b> Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

<b>(No)</b> Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(No)</b> Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(Yes)</b> Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLF289**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWA325</b>		

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency
<b>01860.00000</b>	<b>01865.00000</b>
<b>01940.00000</b>	<b>01945.00000</b>

**6) Coverage Requirements - Partitioning**

<b>(Yes)</b> Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
<b>(No)</b> Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

<b>(No)</b> Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(No)</b> Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(Yes)</b> Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLF289**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment) Schedule C # Attached:	4) Population of Partitioned Area <b>54997</b>
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**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency
<b>01850.00000</b>	<b>01855.00000</b>
<b>01930.00000</b>	<b>01935.00000</b>

**6) Coverage Requirements - Partitioning**

<b>(Yes)</b> Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
<b>(No)</b> Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

<b>(No)</b> Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(No)</b> Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(Yes)</b> Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLF216**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment) Schedule C # Attached:	4) Population of Partitioned Area
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**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

<b>(Yes)</b> Option 1	Partitioner and Partitionee each certify that they will be subject partitioned areas.
<b>(No)</b> Option 2	Partitioner certifies that the 5 year coverage requirements have requirements must be met for the entire license area. Partitionee certifies that only the substantial service requiremer met by the end of the 10 year license term.

Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the

<b>(No)</b> Option 2	applicable coverage requirements for the entire license area.
<b>(Yes)</b> Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign. KNLF216

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
HWY227	Schedule C # Attached:	82980

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency
01850.00000	01855.00000
01930.00000	01935.00000

**6) Coverage Requirements - Partitioning**

<b>(Yes)</b> Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
<b>(No)</b> Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

<b>(No)</b> Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(No)</b> Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(Yes)</b> Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign **KNLH721**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned <b>HWY249</b>	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment) Schedule C # Attached:	4) Population of Partitioned Area <b>124017</b>
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**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Coverage Requirements - Partitioning**

(No) Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(Yes) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Disaggregation - Disaggregation**

(No) Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **WPOI214**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
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**5) Spectrum Disaggregated (in MHz)**

<b>Lower Frequency</b>	<b>Upper Frequency</b>
01850.00000	01855.00000
01930.00000	01935.00000

**6) Coverage Requirements - Partitioning**

<b>(Yes)</b> Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
<b>(No)</b> Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

<b>(No)</b> Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(No)</b> Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(Yes)</b> Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLG505**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWY329</b>	Schedule C # Attached:	<b>42649</b>

**5) Spectrum Disaggregated (in MHz)**

<b>Spectrum Disaggregated</b>	
Lower Frequency	Upper Frequency

**6) Coverage Requirements - Partitioning**

<b>(No)</b> Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
<b>(Yes)</b> Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disagregatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disagregatee each certify that the Disagregatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disagregatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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2) Defined Area to be Partitioned . . .	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWY401</b>	Schedule C #Attached:	<b>38559</b>

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Coverage Requirements - Partitioning**

(No) Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(Yes) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disagregatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disagregatee each certify that the Disagregatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disagregatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: <b>KNLG545</b>
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**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Coverage Requirements - Partitioning**

(No) Option 1	Partitioner and Partitionee each certify that they will be subject to the same coverage requirements for their respective partitioned areas.
(Yes) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

(No) Option 1	Disaggregator and Disaggratee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 2	Disaggregator and Disaggratee each certify that the Disaggratee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
(No) Option 3	Disaggregator and Disaggratee each cert fy they will share respons o lity for meeung the app cable coverage requirements for the entire license area.

<b>FCC Form 603 Schedule B</b>	<b>Partition and Disaggregation Schedule</b>	Approved by OMB 3060 - 0800 See instructions for public burden estimate
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1) Partitioner/Disaggregator Call Sign: **KNLG564**

**Geographic Area Partitioned**

2) Defined Area to be Partitioned	3) Undefined Area to be Partitioned (Complete undefined geographic area attachment)	4) Population of Partitioned Area
<b>HWY445</b>	Schedule C # Attached:	<b>4601</b>

**5) Spectrum Disaggregated (in MHz)**

Spectrum Disaggregated	
Lower Frequency	Upper Frequency

**6) Coverage Requirements - Partitioning**

(No) Option 1	Partitioner and Partitionee each certify that they will be subject to the Same coverage requirements for their respective partitioned areas.
(Yes) Option 2	Partitioner certifies that the 5 year coverage requirements have been or will be met and that the 10 year coverage requirements must be met for the entire license area. Partitionee certifies that only the substantial service requirement for renewal expectancy for the partitioned area must be met by the end of the 10 year license term.

**7) Coverage Requirements - Disaggregation**

<b>(No)</b> Option 1	Disaggregator and Disaggragatee each certify that the Disaggregator will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(No)</b> Option 2	Disaggregator and Disaggragatee each certify that the Disaggragatee will maintain responsibility for meeting the applicable coverage requirements for the entire license area.
<b>(No)</b> Option 3	Disaggregator and Disaggragatee each certify that they will share responsibility for meeting the applicable coverage requirements for the entire license area.

**Attachment List**

Attachment Type	Date	Description	Contents
Other	10/11/02	Ex. B: Response to Question 77	<a href="#">0177949669797684409159079.pdf</a>
Other	11/06/02	Restated Ex. A: Public Interest Statement	<a href="#">0178009009797684409159079.pdf</a>