READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING	FEDERAL COMMUNICATIONS COMMISSION				ON	Approved by OMB 3060-0589 Page No <u>1</u> of <u>1</u>			
(1) LOCKBOX # 358315	REMITTANCE ADVICE				SPECIAL USE				
					FCC USE ONLY				
			A - PAYER INFOR	MATION					
(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) Alarm Device Manufacturing Company					((3) TOTAL AMOUNT PAID (U.S. Dollars and cents) \$1040.00			
(4) STREET ADDRESS LINE NO. 1 A Division of Pittway Corporation									
(5) STREET ADDRESS LINE NO. 2 165 Eileen Way									
(6) CITY Svosset						7) STATE NY	(8) ZIP CO	DE 1 791	
(9) DAYTIME TELEPHONE NUMBER (inc 516 - 9216704 x 6640		(10) COUNTRY CODE (if not in U.S.A.)							
FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED									
(11) PAYER (FRN) 0004071130			(12) PAYER (TIN) 135616408						
IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B									
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) (13) APPLICANT NAME									
Alarm Device Manufacturing Company									
(14) STREET ADDRESS LINE NO. 1 A Division of Pittwav Corporation									
(15) STREET ADDRESS LINE NO. 2 165 Eileen Wav									
(16) CITY Syosset						17) STATE NY	(18) ZIP CO 1'	DDE 1791	
(19) DAYTIME TELEPHONE NUMBER (include area code) (20) COUNTRY CODE (if not in U.S.A.) 516-921-6704									
FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED									
(21) APPLICANT (FRN) 0004071130		(22) APPLICANT (TIN) 135616408							
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET									
(23A) CALL SIGN/OTHER ID			(24A) PAYMENT TYPE CODE (25A) O EGC 1			UANTITY			
(26A) FEE DUE FOR (PTC) \$1040.00	(27A) TOTAL FEE \$1040.00								
(28A) FCC CODE 1 CFS8D5815	(29A) FCC CODE 2 13EA821136								
(23B) CALL SIGN/OTHER ID			(24B) PAYMENT TYPE CODE (25B) Q			UANTITY			
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE			FCC USE	ONLY				
(28B) FCC CODE 1	(29B) FCC CODE 2								
SECTION D - CERTIFICATION									
(30) CERTIFICATION STATEMENT									
I,Kenneth L. Addy, certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information and belief. SIGNATUREKenneth L. Addy DATE 11/25/2003									
SECTION E - CREDIT CARD PAYMENT INFORMATION									
(31) MASTERCARD/VISA ACCOUNT NUMBER:								EXPIRATION DATE:	
MASTERCARD									
VISA I hereby authorize the FCC to charge my VISA or MASTERCARD for the service(s)/authorization herein described.									
SIGNATURE DATE									