

MFA M. Flom Associates, Inc.
Global Compliance Center

3356 North San Marcos Place, Suite 107
Chandler, Arizona 85224-1571
(602) 926-3100, FAX: 926-3598
www.goodnet.com/~mflom

PLEASE NOTE:

ZIP CODE CHANGED TO 85225-1571

NEW PHONE NO. (480) 926-3100 NEW FAX: (480) 926-3598
NEW ELECTRONIC ADDRESSES: www.mflom.com general@mflom.com

October 11, 1999.

Federal Communications Commission,

Applicant: DPI (H.K.) LTD.
Equipment: FCC ID: M2UFRS-200 EA95168

Gentlemen:

The following attachments should form part of this application, i.e.

1. Amended Page 2 of Form 731, showing the same P.O. as for MUSICAL ELECTRONICS LTD., on which latter application this present one is based.
2. Photographs - these were not submitted with the original application.

We trust the foregoing meets the requirements of the Commission.

Thank you



MARTHA FLOM, Office Manager

mgf
encs.

CC: Applicant
CC: A2LA Corrective Action File

SECTION IV - Enter FCC ID from Page 1, Section I

M2UFRS-200

1.(a) Instead of Applicant, FCC is authorized to mail original Grant to: (See instructions)

Firm name, **M. FLOM ASSOCIATES, INC.**
 number, street, **3356 N. San Marcos Place, Suite 107**
 City, State/Country, **CHANDLER, ARIZONA, U.S.A.**
 ZIP/Postal Code **85225-1571**

(b) Name, Title and Mail Stop, if any, of person at above address to receive Grant: (If 1.(a) is completed, this item must be completed)

MORTON FLOM, P. Eng., President

2.(a) Technical contact:

Firm name, **M. FLOM ASSOCIATES, INC.**
 contact person, **MORTON FLOM, President**
 number, street, **3356 No. San Marcos Place, #107**
 City, State/Country, **CHANDLER, ARIZONA, U.S.A.**
 ZIP/Postal Code **85225 1571**

(b) Telephone No. (Area/Country/City code, No. and Ext.)

1 480 926 3100

(c) FAX No. (Area/Country/City code and No.)

1 480 926 3598

(d) Internet e-mail address:

www.mflom.com**e-mail: general@mflom.com**

(e) Non-Technical contact:

Firm name, **M.FLOM ASSOCIATES, INC.**
 contact person, **MORTON FLOM, President**
 number, street, **3356 No. San Marcos Place, #107**
 City, State/Country, **CHANDLER, ARIZONA, U.S.A.**
 ZIP/Postal Code **85225 1571**

(f) Telephone No. (Area/Country/City code, No. and Ext.)

1 480: 926 3100

(g) FAX No. (Area/Country/City code and No.)

1 480: 926 3598

(h) Internet e-mail address:

www.mflom.com**e-mail: general@mflom.com**

3. Does this application include a request for confidentiality for any portion(s) of the data contained in this application pursuant to 47 CFR §0.459 of the Commission's Rules? If "Yes" see instructions.

☐ Yes☒ No

4. Does the applicant request that the Commission defer grant of this application pursuant to 47 CFR §0.457(d)(1)(ii)? (See instructions)

☐ Yes☒ No

5. Type of equipment authorization requested: (check one box only)

☒ Certification☐ Type Acceptance☐ Notification

6.(a) Equipment Code and description: (See instructions, page 4)

F R F

Family Radio Face Held Transmitter
 (UHF-FM HANDHELD FRS TRANSCEIVER)

(b) Equipment will be operated under FCC Rule Part(s):

95.191

7. Application is for: (Check one box only)

☐ 1. Original equipment
 (See instructions)

☐ 2. Change in identification of presently authorized equipment
 See Page 3 Item 10b
Multiple Listing
 ORIGINAL FCC ID Grant date

☐ 3. Class II permissive change or modification of presently authorized equipment
 (See instructions)

8. EQUIPMENT SPECIFICATIONS: (See instructions)

(a) Frequency range in MHz	(b) Rated RF power output in watts	(c) Frequency tolerance %, Hz, ppm	(d) Emission designator (See 47 CFR §2.201 and §2.202)	(e) Microprocessor model number
462.5625 to 467.7125	.3 ERP	±2.5 ppm	11K0F3E	-

9. Is the equipment in this application:

(a) a composite device subject to more than one type of equipment authorization?

☐ Yes☒ No

(b) part of a system that operates with, or is marketed with, another device that requires an equipment authorization?

☐ Yes☒ No

If either of the above questions is answered "Yes" complete items 10.(a) and (b). (See instructions)