City and Country:

fountain valley,

United States

Date:

2014/06/10

Name:

ADAM YU

(this must be a person)

## FCC Declaration of Conformity

Number: CF302 Version: V05

Date: 21-05-2012

We,								DoC
Company Name:	MAXW	EST	TELECOM					
Address:								
Postal/Zip:	92708		City: fount		State/Province:	California	Country: Un	ited States
Contact Person:		Mr.	Ms. Name:			Function:		
Email:	maxwe	st070	9@163.com	Web:	Phone:	213-249-337		
declare for the	equipme	nt ide	ntified by:					
Product Descript	tion	WC	DMA MOBILE	PHONE				
Type or Model(s)		ORE	BIT R5					
Tradename or Brand(s)		MAX	KWEST					
that:  (if the DoC test repx		r C	equirement carried out p	s for DO prior to m	s also compliant v C. And the DoC p arketing the device na below)	procedure sha ce in the US.		
Testing Laboratory name: Cerpass Technology Corp.		City and Cou Taiwan	-	b accreditation Number /1049, TW1061, 488071		t Report Number: EFD1405116	Date of issue: Jun 10, 2014	
(if no DoC test repo	ort is availal	ble at th	is moment, then if	you agree with	n the statement made in item	n b below, please cro	ss item b below)	
,		_			xecute and finish the r following Accredited			
Accredited Test F	Firm or La	borato	ry name, City an	d Country:				
Attestation:								
					e to label the equipme CC rule part 15.19.	nt with the FCC	logo, the name of	f the

Function:

General Manager

Signature:

Adam

(or official company stamp)