READ INSTRUCTIONS CAREFULLY			PPROVED BY OMB	
BEFORE PROCEEDING	FEDERAL COMMUNICATIONS COMMISSION			3060-0589
	REMITTANCE ADVICE	SPECIA	LUSE	
(1) LOCKBOX #	PAGE NO	FCC US	E ONLY	
	SECTION A - PAYER INFORMATION			
(2) PAYER NAME (if paying by credit card, enter name exactly	as it appears on your card)	ı	UNT PAID (dollars and cents)	
Orbital Sciences (4) STREET ADDRESS LINE NO. 1		<b>s</b> 45.0	0	
21700 Atlantic Bc	pulevard			
ocny Dulles	(7) STATE	(8) ZIP CODE		
(9) DAYTIME TELEPHONE NUMBER (Include area code)	(10) COUNTRY CODE (If not in U.S.A.)	20	166	
IF DAVED HARE AND				
IF PAYER NAME AND IF MORE THAN O	THE APPLICANT NAME ARE DIFFEREN NE APPLICANT, USE CONTINUATION S	T, COMP	LETE SECTION	В
	SECTION R . APPLICANT INFORMATION	HEETS (	FORM 159-C)	
(11) APPLICANT NAME (if paying by credit card, enter name ex	actly as it appears on your card)			
(12) STREET ADDRESS LINE NO. 1				
(13) STREET ADDRESS LINE NO. 2				
(14) CITY	(15) STATE	(16) ZIP CODE		·
(17) DAYTIME TELEPHONE NUMBER (Include area code)	(18) COUNTRY CODE (if not in U.S.A.)	<u> </u>		···
COMPLETE SECTION C FOR EACH	SERVICE, IF MORE BOXES ARE NEEDED, USE	CONTINU	ATION SHEETS (F	ORM 159-C)
(19A) FCC CALL SIGN/OTHER ID (20A) PAYMENT TY	SECTION C - PAYMENT INFORMATION PE CODE (PTC) (22A) FEE DUE FOR (PTC) IN BLOCK	K 20A	FCC USE ONLY	
E 22A) FCC CODE 1	A E \$ 45.00		A SERVICE SERV	
	way rec code 2			
198) FCC CALL SIGN/OTHER ID (298) PAYMENT TY	PE CODE (PTC) (218) QUANTITY (228) FEE DUE FOR (PTC) IN BLOC	K 20B	FCC USE ONLY	
238) FCC CODE 1	\$ (248) FCC CODE 2			
19C) FCC CALL SIGNOTHER ID (20C) PAYMENT TY	PE CODE (PTC) (21C) QUANTITY (22C) FEE DUE FOR (PTC) IN BLOC	K 20C	FCC USE ONLY	
23C) FCC CODE 1	\$ (24C) FCC CODE 2			
190) FCC CALL SIGN/OTHER ID (200) PAYMENT TY	PE CODE (PTC) (210) QUANTITY (22D) FEE DUE FOR (PTC) IN BLOC	K 20D	FCC USE ONLY	i er kalen de
23D) FCC CODE 1	\$ (24D) FCC CODE 2	72		
SECTION D -	TAXPAYER INFORMATION	N (R	<b>EQUIRED</b>	
PAYER TIN O C 1	LONG COMPLETE THIS BLOCK ONLY IF APPLICA	NT NAME IN B-11 IS D	FFERENT FROM PAYER RAME IN A.	
0 6 - 1	2 0 9 5 6 1 APPLICANT TIN			
7) CERTIFICATION STATEMENT	SECTION E - CERTIFICATION			
PRINT NAME)	Certify under penalty of perjury that the foreg	oing and s	upporting information	on
are true and correct to the best of my kno	owledge, infomation and belief. SIGNATURE	$\geq u$	ung Lee	
MASTERCARDWISA ACCOUNT	SECTION F - CREDIT CARD PAYMENT INFORMATION	ON		
MASTERCARD		EXPIRATIO	DATE:	
		MONTH	YEAR	
VISA I hereby authorize the FCC to charge my VISA or MAST	AUTHORIZED SIGNATURE	DATE		
for the service(s)(sutherizations(s) herein described.	<del></del>			
SEE PUE	BLIC BURDEN ESTIMATE ON REVERSE	ECC ECC	159 HH V 1997 /DEVICED	

FCC FORM 159 JULY 1997 (REVISED)

Approved by OM8 3060-0065 Expires 9/30/98

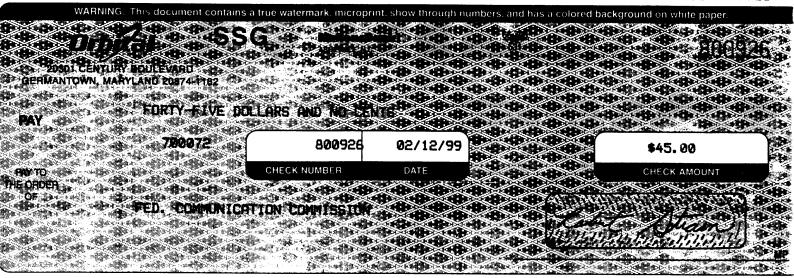
## FEDERAL COMMUNICATIONS COMMISSION

## FCC FORM 442

FOR FCC	·	_
USE		

APPLICATION FOR NEW OR MODIFIED RADIO STATION AUTHORIZATION UNDER PART 5
OF FCC RULES - EXPERIMENTAL RADIO SERVICE (OTHER THAN BROADCAST)

SECTION I				
APPLICANT NAME (Last, first, middle initial)				
Orbital Sciences Corporation				
MAILING ADDRESS (Line 1) (Maximum 85 characters - re	efer to Instruction	(2) on reverse	of form)	
21700 Atlantic Boulevard				
MAILING ADDRESS (Line 2) (if required) (Maximum 65 c	haracters)			
•				
Dulles				
STATE OR COUNTRY (if foreign address)	ZIP CODE	CALL SIGN	CALL SIGN OR FILE NUMBER	
VA	20166	WA2XGO		
Enter in Column (A) the correct Fee Type Code for the servi	ice you are applying	for. Fee Type C	odes may be found in FCC	
ree Filing Guides. Enter in Column (B) the Fee Multiple, if app	olicable. Enter in Co	lumn (C) the resu	alt obtained from multiplying	
the value of the Fee Type Code in Column (A) by the number  (A) (B)	r entered in Column (C)	(B), if any.		
FEE TYPE CODE FEE MULTIPLE	FEE DUE FOR FEE TYPE			
(1) (If required)	CODE IN COLUMN (A)		FOR FCC USE ONLY	
E A E	\$ 45.00			
SECTION II — To be used only when				
SECTION II — To be used only when requirement to list more	you are requesting e than one Fee Typi	concurrent action Code.	ns which result in a	
***				
(A) (B)  FEE TYPE CODE FEE MULTIPLE	(C) FEE DUE FOR	EEE TYDE	FOR FCC USE ONLY	
(if required)	CODE IN CO			
(2)	5			
(3)	•			
(4)	\$	1		
(5)				
ADD ALL AMOUNTS SHOWN IN COLUMN C, LINES (1)			100000000000000000000000000000000000000	
THROUGH (5), AND ENTER THE TOTAL HERE. THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED	TOTAL AMOUNT WITH THIS AP OR FIL	REMITTED PLICATION	FOR FCC USE ONLY	
REMITTANCE.	\$ 45.00	NG		



#8000800926# #1053107989# 0480100672#