

**Application Information**

File Number: 5923-EX-PL-1997

Date Entered: 02/10/1998

App Purpose: ☒ New ☐ Modification

Fee Control #:

Receipt Date: 10/29/1997

App Source: ☐ Electronic ☒ Paper**Applicant Information**

Name: OC, INCORPORATED

Attn: DOUGLAS SOMMER

PO Box:

Address: 5440 CHEROKEE AVENUE

Mail Stop:

City: ALEXANDRIA

State: VA

Zip Code: 22312

Country:

**Correspondence Numbers**

Phone Number:

Fax Number:

Email Address:

**Signature Information**

Signature:

Signature Date: 00/00/0000

Title:

Signature Type: ☒ Individual  
Applicant☐ Member of  
Applicant  
Partnership☐ Authorized  
Employee☐ Officer of Applicant  
Corporation or Association

**License Information**

**Callsign:** WA2XOO

**Issue Date:** 00/00/0000

**Expiration Date:** 00/00/0000

**File Number:** 5923-EX-PL-1997

**Is Information for this license to be held confidential?**

☐ Yes ☒ No

**Is this license classified?**

☐ Yes ☒ No

**Rule Parts under which this license will be granted:**

**Radio Service:** XD

**Experiment Type:**