DATA NETWORK IDENTIFICATION CODE FILING FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu:

SEFAA1

1. Applicant

Name	Shashamane Ethiopia Federal Agents Association	Phone Number:	202–280–7317
DBA 1	Name:	Fax Number:	877–513–2785

Street: 405 Lexington Avenue **E-Mail:** sefaa.gov@ewfusa.org

Chrysler Building 25th & 26th Floor

City: NEW YORK State: NY

Country: USA Zipcode: 10174 -

Attention: Clayton M. Bernard Ex

2. Contact						
Name:	Shashamane Ethiopi Agents Association	a Federal Phone Number	202-280-73	117		
Compa	nny: SHASHAMANE ET FEDERAL AGENTS ASSOCIATION TH	S	877–513–27	785		
Street:	405 Lexington Aven	ue E-Mail:	sefaa.gov@e	ewfusa.org		
	Chrysler Building 25	Chrysler Building 25th & 26th Floor				
City:	NEW YORK	State:	NY			
Counti	y: USA	Zipcode:	10174 –			
Attenti	on:	Relationship:	Same			
3. Type Request		4. Rea	ıssign			
New		gn Reaso	n:			
_	•	From	Company:			
Note: Please subtype:	mit any needed attachments fo	r the given request To Co	ompany:			
	Attachment 1:	From	Code: To	Code:		
	Attachment 2:					
	Attachment 3:					
5. Network Nan	ne FRASBERG					

6. International Service SHASHAMANE Ethiopia		
7. Action Requested (If the complete description does not appear in this box, please go to the end of the form International Network. Haile Selassie I.	to view it in i	its entirety.)
8. Code assignments held in excess of 18 months without implementation must be returned to this Administrator for reassignment. Unless this office is specifically notified of the actual implementation of assignments, it will be assumed that those implementations did not occur and such assignments will be available for reassignment. I have read and understand these conditions.	⊚ Yes	O No
9. I am aware that all DNIC assignments are provisional and that nobody has a property right in a DNIC. I am aware that the Commision may take an assigned DNIC and reassign it to another person.	⊘ Yes	O No
10. I certify that all necessary local, state, and federal authorizations needed have been obtained.	• Yes	O No

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