

FEDERAL COMMUNICATIONS COMMISSION  
FCC FOREIGN CARRIER AFFILIATIONS NOTIFICATION

FOR OFFICIAL USE ONLY

CARRIER INFORMATION

CONFIDENTIALITY: Carriers filing foreign carrier affiliation notifications pursuant to Section 63.11(a) of the Rules, 47 C.F.R §63.11(a), and requesting confidential treatment for the first twenty days pursuant to Sections 63.11(i) and 0.459 of the Rules, 47 C.F.R. §§63.11(i) and 0.459, should not file this form electronically, but instead, should file this form and the required attachments manually. Please send the manual submission to:

Secretary  
Room TW-B204F  
445 12th Street, SW  
Washington, DC 20554

REMINDER: Carriers filing foreign carrier affiliation notifications are reminded to review the requirements in Section 63.11 of the Rules, 47 C.F.R. §63.11. See FACT SHEET

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

GF – PUBLIC SAFETY NTL PLAN – 821-824 – 866-869 MHZ CONVENTIONAL

1. Carrier

|                      |                                                                        |                      |                 |
|----------------------|------------------------------------------------------------------------|----------------------|-----------------|
| <b>Name:</b>         | GF – PUBLIC SAFETY NTL<br>PLAN – 821-824 – 866-869<br>MHZ CONVENTIONAL | <b>Phone Number:</b> | 773-264-4609    |
| <b>DBA<br/>Name:</b> |                                                                        | <b>Fax Number:</b>   |                 |
| <b>Street:</b>       | 49 W 118TH ST                                                          | <b>E-Mail:</b>       | msbrain@att.net |
| <b>City:</b>         | CHICAGO                                                                | <b>State:</b>        | IL              |
| <b>Country:</b>      | USA                                                                    | <b>Zipcode:</b>      | 60628 – 6142    |
| <b>Attention:</b>    | Ms BRAIN GAYLORD-TOSCANA CERVELLO                                      |                      |                 |

2. Contact

|                   |                                                                    |                      |                 |
|-------------------|--------------------------------------------------------------------|----------------------|-----------------|
| <b>Name:</b>      | BRAIN GAYLORD-TOSCANA<br>CERVELLO                                  | <b>Phone Number:</b> | 773-264-4609    |
| <b>Company:</b>   | GF – PUBLIC SAFETY NTL<br>PLAN – 821-824 – 866-869<br>MHZ CONVENTI | <b>Fax Number:</b>   |                 |
| <b>Street:</b>    | 49 W 118TH ST<br>FL 1                                              | <b>E-Mail:</b>       | msbrain@att.net |
| <b>City:</b>      | CHICAGO                                                            | <b>State:</b>        | IL              |
| <b>Country:</b>   | USA                                                                | <b>Zipcode:</b>      | 60628-6142      |
| <b>Attention:</b> | MS BRAIN GAYLORD-<br>TOSCANA CERVELLO                              | <b>Relationship:</b> | Same            |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| 3. Place of Incorporation of Carrier                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | USA; US; USFC; CANADA; ALL OTHER FOREIGN COUNTRIES; |
| <b>4. Other Company(ies) and Place(s) of Incorporation</b><br>USPTO; HIPAA;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                     |
| <b>5. Country or Countries for which carrier is notifying the Commission of an affiliation.</b> USA; US; USFC; CANADA; ALL OTHER FOREIGN COUNTRIES;                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                     |
| 6. Is there an accompanying Transfer of Control or Assignment Application pursuant to Section 63.18(e)(3) of the Rules, 47 C.F.R. §63.18(e)(3), to this foreign carrier affiliation notification? <input type="radio"/> Yes <input checked="" type="radio"/> No                                                                                                                                                                                                                                                                                                     |                                                     |
| <b>7. If the answer to question 6 is yes, please provide the date of filing of the Transfer of Control or Assignment Application.</b>                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                     |
| 8. Is this foreign carrier affiliation notification being filed as a prior notification pursuant to Section 63.11(a) or as a post notification pursuant to Section 63.11(b)–(c)? <input checked="" type="radio"/> Prior <input type="radio"/> Post                                                                                                                                                                                                                                                                                                                  |                                                     |
| 9. If this foreign carrier affiliation notification is being filed as a prior notification pursuant to Section 63.11(a)(1) or (2) of the Rules, 47 C.F.R. §§63.11(a)(1) or (2), is this filing being made at least forty–five days prior to the consummation of the acquisition? If the answer to this question is no, include in an Attachment (use Attachment 1 below) a statement explaining the reason for non–compliance with the Section 63.11(a) filing requirement. <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A |                                                     |

10. If this foreign carrier affiliation notification is being filed as a post notification pursuant to Section 63.11(b)–(c) of the Rules, 47 C.F.R. §63.11(b)–(c), is this filing being made within thirty days after consummation of the acquisition? If the answer to this question is no, include in an Attachment (use Attachment 1 below) a statement explaining the reason for non-compliance with the Section 63.11(c) filing requirement.

☐ Yes ☐ No ☒ N/A

11. If the foreign carrier affiliation notification is being filed as a post notification pursuant to Section 63.11(c) of the Rules, 47 C.F.R. §63.11(c), are you relying upon an exception in Section 63.11(b)?

☐ Yes ☐ No ☒ N/A

12. If the answer to question 11 is yes, please certify to one or more of the following questions as applicable for each carrier and destination market for which notification is being made (see Section 63.11(b)):

Has the Commission previously determined in an adjudication that the foreign carrier(s) lacks market power in any destination market being notified in this filing? If the answer is yes, please provide the citation(s) to the decision(s) in an Attachment (use Attachment 1 below).

☐ Yes ☒ No ☐ N/A

Does the foreign carrier(s) own facilities in any destination market(s) being notified in this filing (see Section 63.11(b)(1)(ii) for a definition of "facilities")? If the answer is yes, please specify the carrier(s) and destination market(s) being notified in this filing in an attachment (use Attachment 1 below).

☐ Yes ☒ No ☐ N/A

Is the foreign carrier authorized to operate in a WTO Member?

If the foreign carrier is authorized to operate in a WTO Member, is the authorized carrier making this filing demonstrating that it is entitled to retain non-dominant classification on the newly affiliated route pursuant to Section 63.10 of the Rules, 47 C.F.R. §63.10? If so, please provide the necessary demonstration in an Attachment (use Attachment 1 below).

☐ Yes ☒ No ☐ N/A

If the foreign carrier is authorized to operate in a WTO Member, is the authorized carrier agreeing to comply with the dominant carrier safeguards contained in Section 63.10 of the Rules, 47 C.F.R. §63.10, effective upon the acquisition of the affiliation?

☒ Yes ☐ No ☐ N/A

13. If the foreign carrier affiliation notification is being filed as a prior notification pursuant to Section 63.11(a) of the Rules, 47 C.F.R. §63.11(a), is the foreign carrier authorized to operate in a non-WTO Member country? ☒ Yes ☐ No ☐ N/A

14. If the answer to question 13 is yes, is the authorized carrier making the required showing that the foreign carrier lacks market power in the non-WTO Member country (see Section 63.18(k)(2), 47 C.F.R. §63.18(k)(2)) or, alternatively, the Effective Competitive Opportunities showing specified in Section 63.18(k)(3) of the Rules, 47 C.F.R. §63.18(k)(3)? If yes, please provide the supporting information in an Attachment (use Attachment 1 below). ☒ Yes ☐ No ☐ N/A

15. If the answer to question 13 is yes and the answer to question 14 is no, you may provide information in an Attachment (use Attachment 1 below) to demonstrate it continues to serve the public interest for you to operate on the route for which you propose to acquire an affiliation with the non-WTO foreign carrier. (See Section 63.11(g)(2)).

16. Regardless of whether the foreign carrier affiliation notification is filed as a prior or post notification, does the authorized carrier request continued regulation as a non-dominant international carrier pursuant to Section 63.10 of the Rules, 47 C.F.R. §63.10? If yes, include an Attachment (use Attachment 1 below) stating how the carrier qualifies for non-dominant classification pursuant to this section. ☐ Yes ☒ No

17. Regardless of whether the foreign carrier affiliation notification is filed as a prior or post notification, provide in an Attachment (use Attachment 1 below) the name of the newly affiliated foreign carrier(s) and the country or countries in which it is authorized to provide telecommunications services to the public.

18. Regardless of whether the foreign carrier affiliation notification is filed as a prior or post notification, state in an Attachment (use Attachment 1 below) what services the authorized carrier(s) making this filing is authorized to provide to each country named in response to question 17 and the FCC file numbers under which each such authorization was granted.

19. Regardless of whether the foreign carrier affiliation notification is filed as a prior or post notification, state in an Attachment (use Attachment 1 below) which, if any, of the countries the authorized carrier making this filing serves solely through the resale of international switched services of unaffiliated U.S. facilities-based carriers.

20. Regardless of whether the foreign carrier affiliation notification is filed as a prior or post notification, provide in an Attachment (use Attachment 1 below) the name, address, citizenship and principal business of any person or entity that directly or indirectly owns at least ten percent of the equity of the authorized carrier making this filing, and the percentage of equity owned by each of those entities to the nearest one percent.

21. Regardless of whether the foreign carrier affiliation notification is filed as a prior or post notification, provide the name of any interlocking directorates, as defined in Section 63.09(g) of the Rules, 47 C.F.R. §63.09(g), with each foreign carrier named in the notification.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| 22. By checking Yes, the carrier certifies that it has not agreed to accept special concessions directly or indirectly from any foreign carrier with respect to any U.S. international route where the foreign carrier possesses market power on the foreign end of the route.                                                                                                                                                                                                                   | <input checked="checked" type="radio"/> Yes <input type="radio"/> No |
| 23. By checking Yes, the carrier certifies that it shall maintain the continuing accuracy of information provided pursuant to Section 63.11 of the Rules, 47 C.F.R. §63.11, for a period of forty-five days after the filing of this form. In addition, the applicant certifies that it shall immediately inform the Commission if at any time, not limited to forty-five days, the representations in the "special concessions" certification referenced in question 22 are no longer accurate. | <input checked="checked" type="radio"/> Yes <input type="radio"/> No |

**CERTIFICATION**

|                                                                                                                                                                                                                                                                                   |                                                              |                 |    |    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-----------------|----|----|
| <b>24. Typed Name of Person Signing</b><br>MS BRAIN GAYLORD-TOSCANA CERVELLO                                                                                                                                                                                                      | <b>25. Title of Person Signing</b><br>CARRIER/RECEIVER/PAYEE |                 |    |    |
| WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT<br>(U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION<br>(U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503). |                                                              |                 |    |    |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 5px;">26. 1:    USPTO</td> <td style="width: 33%; padding: 5px;">2:</td> <td style="width: 33%; padding: 5px;">3:</td> </tr> </table>                                     |                                                              | 26. 1:    USPTO | 2: | 3: |
| 26. 1:    USPTO                                                                                                                                                                                                                                                                   | 2:                                                           | 3:              |    |    |

## **FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT**

The public reporting for this collection of information is estimated to average 1 – 6,056 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERF, Paperwork Reduction Project (3060-0686), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS ADDRESS.

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**THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.**