INTERNATIONAL SECTION 214 APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

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

GE Business Productivity Solutions, Inc. & Business Productivity Solutions, Inc. Joint Application for Consent to Transfer of Assets

1. Applicant			
Name:	GE Business Productivity Solutions, Inc.	Phone Number:	770–541–5782
DBA Name:		Fax Number:	770–541–5703
Street:	3225 Cumberland Boulevard	E-Mail:	meredith.gifford@ge.com
	Suite 920		
City:	Atlanta	State:	GA
Count	ry: USA	Zipcode:	30339 –
Attent	ion: Meredith H Gifford		

2. Contact

Name: Melissa Conway Phone Number: 202–955–9667

Company: Kelley Drye & Warren LLP Fax Number: 202–955–9792

Street: 1200 19th Street, NW E-Mail: mconway@kelleydrye.com

Suite 500

City: Washington State: DC

Country: USA Zipcode: 20036 -

Contact Relationship: Legal Counsel

Title:

3. Place of Incorporation of Applicant Please See Attached Application.

4. Other Company(ies) and Place(s) of Incorporation

5. Service Type(s) (check all that apply)			
Global or Limited Global Facilities—Based Authority (Section 63.18(e)(1))			
Global or Limited Global Resale Authority (Section 63.18(e)(2))			
Individual Facilities—Based Service (Section 63.18(e)(3))			
Individual Switched Resale Service (Section 63.18(e)(3))			
Individual Facilities—Based and Resale Service (Section 63.18(e)(3))			
Switched Services over Private Lines (ISR) (Section 63.16 and/or 63.18 (e)(3))			
Inmarsat and Mobile Satellite Service (Section 63.18(e)(3))			
Overseas Cable Construction (Section 63.18(e)(3))			
Individual Non–Interconnected Private Line Resale Service (Section 63.18(e)(3))			
Other (Section 63.18(e)(3))			
6a. Is a fee submitted with this application?			
If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).			
Governmental Entity Noncommercial educational licensee			
Other(please explain):			
6b. Fee Classification CUT – Section 214 Authority			
7. Destination Country(ies) (e.g., "Country X", "All international points", "All international points except Country X and Country Y" or "Countries X, Y, and Z only".) Please See Attached Application for Consent to Transfer of Assets			

All International Point	n of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resons Except Country X) scription does not appear in this box, please go to the end of the form to view it in its entirety.)	old Services to
So U1	E Business Productivity Solutions, Inc. & Business Productivity olutions, Inc. Joint Application for Consent to a Transfer of Assets nder Section 214 of the Communications Act of 1934, as Amended ATTACHMENT 1)	
	request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in nent of how the application qualifies for streamlined processing.	O No
10. If applying for aut Attachment 1.	hority to provide switched services over private lines pursuant to Section 63.16, provide the required show	ing in
Applicant certifies th	at its responses to questions 11 through 17 are true:	
	a foreign carrier, or is affiliated (as defined in 47 C.F.R. Section 63.09(e)) with a foreign achment 1 the information and certifications required by Section 63.18(i) through (m).	
	t seek authority to provide service to any destination described in paragraphs (1) through (4) Yes If yes, list those destinations in Attachment 1 as a response to question 12.	No

13. Does the applicant seek authority to provide service to any destinations other than those listed in response to question 12 where it has an affiliation with a foreign carrier? If yes, list those destinations in Attachment 1 as a response to question 13.	● N	10
14. [Section 63.18(h)] In Attachment 2, provide the name, address, citizenship and principal business of the applicant's ten percent or greater direct and indirect shareholders or other equity holders, and identify any interlocking directorates.		
15. In Attachment 1, respond to paragraphs (d), (e)(3) and (g) of Section 63.18.		
16. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti–Drug Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.	O 1	No
17. By checking Yes, the applicant certifies that it has not agreed to accept special concessions directly or indirectly from a foreign carrier with respect to any U.S. international route where the foreign carrier possesses sufficient market power on the foreign end of the route to affect competition adversely in the U.S. market and will not enter into such agreements in the future.	O 1	Vo

CERTIFICATION

18. Typed Name of Person Signing Please See Attached Application	19. Title of Person Signing Please See Attached Application				
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT (U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).					
20. 1: Joint Application	2: 3:				

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