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Callsign:

FEDERAL COMMUNICATIONS COMMISSION APPLICATION FOR SPACE STATION SPECIAL TEMPORARY AUTHORITY

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APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: STA Request to Operate Lower Power Repeater at PGA Tour Events

1. Applicant

Name: XM Radio Inc. Phone Number: 202–380–4000

DBA Name: Fax Number: 202–380–4500

Street: 1500 Eckington Place, NE E–Mail: joseph.titlebaum@xmradio.com

City: Washington State: DC

Country: USA Zipcode: 20002 -

Attention: Joseph Titlebaum

2. Contact									
	Name:	Bruce Jacobs	Phone Nu	mber:	202-663-8077				
	Company:	Pillsbury Winthrop Shaw Pittman LLP	Fax Numb	oer:	202-663-8007				
	Street:	2300 N Street, NW	E-Mail:		bruce.jacobs@pillsburylaw.com				
	City:	Washington	State:		DC				
	Country:	USA	Zipcode:		20037 -1128				
	Attention:		Relationsl	nip:	Legal Counsel				
(If your application is related to an application filed with the Commission, enter either the file number or the IB Submission ID of the related application. Please enter only one.) 3. Reference File Number or Submission ID									
4a. Is a fee submitted with this application? in 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):									
4b. Fee Classification CRY – Space Station (Geostationary)									
5. Type Re	equest								
Change Station Location Extend Expiration Date Other									
6. Tempora	ary Orbit Loca	ition		7. Requested Extended E	Expiration Date				

8. Description (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)									
XM Radio Inc. (XM) requests Special Temporary Authority (STA) to operate one lower power terrestrial repeater (less than 2 kW EIRP) at the weekly PGA Tour events occurring at the locations and during the dates listed in Exhibit A and pursuant to the technical parameters listed in Exhibit B attached hereto.									
9. 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 N	0							
10. Name of Person Signing		11. Title of Person Signing							
Joseph M. Titlebaum		General Counsel							
12. Please supply any need attachments.									
Attachment 1: Narrative		Attachment 3:							
			ı						
WILLFUL FALSE STATEMENTS M. (U.S. Code, Title 18, Section (U.S. Code, Title 47, Section	n 1001), AND/OR REV	OCATION OF ANY STA	ATION AUTHORIZATION	-					

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