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Callsign:

## FEDERAL COMMUNICATIONS COMMISSION APPLICATION FOR SPACE STATION SPECIAL TEMPORARY AUTHORITY

## FOR OFFICIAL USE ONLY

## 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:** james.blitz@xmradio.com

City: Washington State: DC

Country: USA Zipcode: 20002 -

**Attention:** James Blitz, Vice President, Regulatory Counsel

2. Contact	İ								
	Name:	Bruce Jacobs	Phone Nu	mber:	202-663-8000				
	Company:	Pillsbury Winthrop Shaw Pittman LLP	Fax Numb	er:	202-663-8007				
	Street:	2300 N Street NW	E–Mail:		bruce.jacobs@pillsburylaw.com				
	City:	Washington	State:		DC				
	Country:	USA	Zipcode:		20037 -1128				
	Attention:		Relationsh	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									
		with this application? I attach FCC Form 159. If No, indicated in the second state of	cate reason fo	or fee exemption (see 47	C.F.R.Section 1.1114).				
Governmental Entity Noncommercial educational licensee									
	(please explain								
4b. Fee Classification CRY – Space Station (Geostationary)									
5. Type R	equest								
Change Station Location Extend Expiration Date Other									
6. Tempor	ary Orbit Loca	ation	ĺ	7. Requested Extended F	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.									
10. Name of Person Signing James S. Blitz		11. Title of Person Signing Vice President, Regulatory Counsel							
12. Please supply any need attachments.									
ttachment 1: XM STA Request Attachment 2:			Attachment 3:						
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).									

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