APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: 4.6m STA

1. Applicant

Name: Bransford Rebman LLC **Phone Number:** 703–998–1703

DBA Name: Fax Number:

Street: 910 16th Street **E-Mail:**

5th floor

City: Washington DC State: DC

Country: USA Zipcode: 20006 -

Attention: Jack Rebman

2. Contact						
<u> </u>	Name:	Joseph A. Godles, Esq.	Phone Nun	nber:	202-429-4900	
	Company:	Goldberg Godles Wiener & Wright	Fax Number	er:	202-429-4912	
	Street:	1229 19th Street, NW	E–Mail:		jgodles@g2w2.com	
	City:	Washington	State:		DC	
	Country:	USA	Zipcode:		20036 -2413	
1	Contact Title:	Attorney	Relationsh	ip:	Legal Counsel	
		er SESLICINTR200301577				
4a. 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):						
4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station						
5. Type Red	quest					
	ed Use Prior I 5/2003	Date				
7. CitySilver Spring				8. Latitude (dd mm ss.s h) 39 0 5.4 N		

9. State MD	10. Longitude (dd mm ss.s h) 77 3 26.9 W					
11. Please supply any need attachments.						
Attachment 1: STA Attachment 2: Freq Co	oord Attachment 3: Rad Haz					
12. 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.)						
Request for expedited processing in accorda	nce with attached.					
13. 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.						
14. Name of Person Signing Philip Harlow	15. Title of Person Signing VP, Business Development					
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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