

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:  
E020106 STA Extension 10-03

**1. Applicant**

<b>Name:</b>	L3 Communications IEC	<b>Phone Number:</b>	714-758-0500 x2741
<b>DBA Name:</b>		<b>Fax Number:</b>	714-758-4222
<b>Street:</b>	602 E. Vermont Street	<b>E-Mail:</b>	Robert.Huffman@L-3Com.com
<b>City:</b>	Anaheim	<b>State:</b>	CA
<b>Country:</b>	USA	<b>Zipcode:</b>	92805 -
<b>Attention:</b>	Mr. Robert A Huffman -		

**2. Contact**

<b>Name:</b>	Jason S. Roberts	<b>Phone Number:</b>	202-728-0400
<b>Company:</b>	Irwin, Campbell & Tannenwald, PC	<b>Fax Number:</b>	202-728-0354
<b>Street:</b>	1730 Rhode Island Ave., NW Suite 200	<b>E-Mail:</b>	jroberts@ictpc.com
<b>City:</b>	Washington	<b>State:</b>	DC
<b>Country:</b>	USA	<b>Zipcode:</b>	20036 -3181
<b>Contact Title:</b>		<b>Relationship:</b>	Legal Counsel

3. Reference File Number SESLIC2002061100939

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 Request

- Use Prior to Grant                       Change Station Location                       Other

6. Requested Use Prior Date  
10/20/2003

7. City

8. Latitude  
(dd mm ss.s h) 0 0 0.0 N

9. State	10. Longitude (dd mm ss.s h) 0 0 0.0 W
11. Please supply any need attachments. Attachment 1: Extension                      Attachment 2:                      Attachment 3:	
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.) <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">See Attachment 1</div>	
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. <input checked="" type="radio"/> Yes <input type="radio"/> No	
14. Name of Person Signing Robert A. Huffman	15. Title of Person Signing President
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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