

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
Special Temporary Authority for Ku-band Transportable Earth Station

1. Applicant

| | | | |
|-------------------|--|----------------------|--------------------------|
| Name: | MCI WORLDCOM Network Services, Inc. | Phone Number: | 972-729-6406 |
| DBA Name: | | Fax Number: | 972-729-7820 |
| Street: | 2400 North Glenville Dept/Loc 41216/107 | E-Mail: | Laura.Birkelbach@mci.com |
| City: | RICHARDSON | State: | TX |
| Country: | USA | Zipcode: | 75082 - |
| Attention: | Laura J Birkelbach | | |

2. Contact

| | | | |
|-----------------------|--|----------------------|--------------------------|
| Name: | Laura J. Birkelbach | Phone Number: | 972-729-6406 |
| Company: | MCI WORLDCOM Network Services, Inc. | Fax Number: | 972-726-7820 |
| Street: | 2400 North Glenville Dept/Loc 41216/107 | E-Mail: | laura.birkelbach@mci.com |
| City: | Richardson | State: | TX |
| Country: | USA | Zipcode: | 75082 - |
| Contact Title: | Sr. Engineer | Relationship: | |

3. Reference File Number

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
08/03/2004

7. City

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

| | |
|---|---|
| 9. State | 10. Longitude (dd mm ss.s h) 0 0 0.0 |
| 11. Please supply any need attachments. Attachment 1: Exhibit A 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: 10px;"> MCI WORLDCOM Network Services, Inc. desires to file for a Special Temporary Authority (STA) to provide digital voice and data services in support of the Federal Emergency Management Agency (FEMA) during and after Hurricane Frances. </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 Laura J. Birkelbach | 15. Title of Person Signing Sr. Engineer |
| 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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