## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: 7/2006 extension of E020160 STA

1. Applicant

Name: L3 Communications IEC **Phone Number:** 714–758–0500 x

**DBA Name:** Fax Number: 714–758–4222

Street: 602 East Vermont Ave E–Mail: Tom.Murphy@L–3com.com

City: Anaheim State: CA

Country: USA Zipcode: 92805 -

**Attention:** Mr. Tom Murphy

2. Contact				
Name:	Michelle A. McClure	Phone Number:	202-728-0400	
Company:	Irwin, Campbell & Tannenwald, P. C.	Fax Number:	202-728-0400	
Street:	1730 Rhode Island Ave., N.W.	E–Mail:	mmcclure@ictpc.com	
	Suite 200			
City:	Washington	State:	DC	
Country:	USA	Zipcode:	20036 -3101	
Attention:		Relationship:	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 SESLIC2002061100939 or Submission ID				
<del>     </del>			nption (see 47 C.F.R.Section 1.1114).	
Other(please explain		ncensee		
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 D 08/04/2006	Date			

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: Public Interest 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.)					
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 Tom Murphy	15. Title of Person Signing Project Manager				
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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