## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

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

1. Applicant

Name: GUAM ARMY NATIONAL Phone Number: 671–735–0439

**GUARD** 

**DBA Name:** Fax Number: 671–735–4083

Street: JFHQ Guam National Guard 430 E–Mail: anthony.santos3@ng.army.mil

ARMY Drive BLDG 300, RM113

City: Barrigada State: GU

**Country:** USA **Zipcode:** 96929 –4421

**Attention:** SGT Anthony P Santos

2. Contact							
Name:		SGT Anthony P Santos	Phone Nu	umber:	671–735–0439		
Co	ompany:	GUAM ARMY NATIONAL GUARD	Fax Num	ıber:	671–735	5–4083	
Stı	reet:	JFHQ Guam National Guard	E-Mail:		anthony.	.santos3@ng.army.mil	
		430 ARMY Drive BLDG 300, RM113					
Ci	ty:	Barrigada	State:		GU		
Co	ountry:	USA	Zipcode:		96929	-4421	
At	tention:	SGT Anthony P Santos	Relations	ship:	Same		
4a. Is a fee  If Yes, con Government Other(ple	submitted v mplete and a ental Entity ase explain)	er SESLIC2008082501092 or Su with this application? attach FCC Form 159. If No, in Noncommercial education b: Guam Army National Guard	ndicate reason al licensee		47 C.F.R.Se	ection 1.1114).	
4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station							
5. Type Request  O Use Prior to Grant O Change Station Location O Other							
6. Requested 08/31/2		ate					

7. CityBarrigada	8. Latitude (dd mm ss.s h) 13 45 58.8 N					
9. State GU	10. Longitude (dd mm ss.s h) 144 48 0.0 E					
11. Please supply any need attachments.						
Attachment 1: STARequest Attachment 2: PCNRA	DHAZ Attachment 3: ANTEXH					
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.)						
STA Request - See Attachment 1						
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 SGT Anthony P Santos	15. Title of Person Signing SGT					
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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