

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA for transfer of control of Americom Government Services, Inc. from SES Americom, Inc.

1. Applicant

Name:	Americom Government Services, Inc.	Phone Number:	703-610-0990
DBA Name:		Fax Number:	703-610-1030
Street:	2010 Corporate Ridge, Suite 600	E-Mail:	michael.cade@americom-gs.com
City:	McLean	State:	VA
Country:	USA	Zipcode:	22102 -
Attention:	Michael F. Cade		

2. Contact

Name:	Michael F. Cade	Phone Number:	703-610-0990
Company:		Fax Number:	703-610-1030
Street:	2010 Corporate Ridge	E-Mail:	michael.cade@americom-gs.com
	Suite 600		
City:	McLean	State:	VA
Country:	USA	Zipcode:	22102 -
Attention:	Michael F. Cade	Relationship:	

(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 or Submission ID

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

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