

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA for CL

1. Applicant

Name:	Sure Shot Transmissions, Inc.	Phone Number:	330-542-0900
DBA Name:		Fax Number:	330-542-1020
Street:	P.O. Box 489 10314 Main Street	E-Mail:	cblasko@sureshotsat.com
City:	New Middletown	State:	OH
Country:	USA	Zipcode:	44442 -0489
Attention:	Ms Carolyn Blasko		

2. Contact

Name:	Sure Shot Transmissions, Inc.	Phone Number:	330-542-0900
Company:		Fax Number:	330-542-1020
Street:	P.O. Box 489 10314 Main Street	E-Mail:	cblasko@sureshotsat.com
City:	New Middletown	State:	OH
Country:	USA	Zipcode:	44442 -0489
Attention:	Carolyn Blasko	Relationship:	Other

(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 SESMOD2012091200810 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 CGB – Mobile Satellite Earth Stations

5. Type Request

- Use Prior to Grant Change Station Location Other

6. Requested Use Prior Date
09/21/2012

7. City Medinah

8. Latitude
(dd mm ss.s h) 41 57 44.27 N

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