## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: E040379 STA Request for Approval to Consummate TC

1. Applicant							
	Name:	Gray Television Group, Inc.	Phone Number:	404-266-8333			
	DBA Name:		Fax Number:				
	Street:	4370 Peachtree Road, NE	E-Mail:				
	City:	Atlanta	State:	GA			
	<b>Country:</b>	USA	Zipcode:	30319 –			
	Attention:	Kevin Latek					

2. Contact							
Name:	Robert J. Folliard III	Phone Number	: 202-7762357				
Compan	y: Cooley LLP	Fax Number:					
Street:	1299 Pennsylvania Avenue, NW	E-Mail:	rfolliard@cooley.com				
	Suite 700						
City:	Washington	State:	DC				
Country	: USA	Zipcode:	20004 –				
Attentio	n: Robert Folliard	<b>Relationship:</b>	Legal Counsel				
(If your application	is related to an application filed with the	e Commission, ent	er either the file number or the IB Submission ID of the related				
application. Please e							
3. Reference File Number SEST/C2014072300609 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).							
<del>-</del>	Intity O Noncommercial educational	licensee					
• Other(please explain):							
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 Use Pr	ior Date						
09/15/2014							
7. City			itude				
		(dd n	um 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: Attachment 1Attachment 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.)						
Applicant requests Special Temporary Authority to consummate the transactions noted in Exhibit 1 prior to FCC approval.						
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 Kevin P. Latek	15. Title of Person Signing Secretary					
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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