## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA for MODIFICATION of E100083

1. Applicant

Name: The Boeing Company **Phone Number:** 206–544–6044

**DBA Name:** Fax Number: 206–662–0701

Street: PO Box 3707 E-Mail:

City: Seattle State: WA

**Country:** USA **Zipcode:** 98124 –2207

**Attention:** Ronald Center

2. Contact				
Name:	The Boeing Company	Phone Number:	714-642-7485	
Compar	ny:	Fax Number:		
Street:	PO Box 3707	E–Mail:	daniel.p.mcneil@boeing.com	
City:	Seattle	State:	WA	
Country	USA	Zipcode:	98124 -2207	
Attentio	n:	Relationship:	Other	
application. Please	* *		file number or the IB Submission ID of the related	
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	on CGX – Fixed Satellite Tran	smit/Receive Earth Station		
5. Type Request				
6. Requested Use Pr 08/10/2017	rior Date			
7. CityHerndon		8. Latitude (dd mm ss.s h)	38 57 32.0 N	

9. State VA	10. Longitude (dd mm ss.s h) 77 22 32.0 W			
11. Please supply any need attachments.				
Attachment 1: 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.)				
STA to continue testing operations during the pendency of Modification application				
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 Ronald E Center	15. Title of Person Signing Senior 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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