APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: E000344 (CLFN-4) STA extension

1. Applicant			
Name:	GUSA Licensee LLC	Phone Number:	985-335-1503
DBA Na	ame:	Fax Number:	985-335-1703
Street:	1351 Holiday Square Blvd.	E-Mail:	Barbee.Ponder@Globalstar.com
City:	Covington	State:	LA
Country	y: USA	Zipcode:	70433 –
Attentio	on: Mr L. Barbee Ponder IV		

2. Contact						
Name:	Wen Doong	Phone Number:	985-335-1675			
Company:	Globalstar, Inc.	Fax Number:				
Street:	1351 Holiday Square Blvd.	E–Mail:	Wen.Doong@Globalstar.com			
City:	Covington	State:	LA			
Country:	USA	Zipcode:	70433 –			
Attention:		Relationship:	Engineer			
	(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 SESSTA2020033000349 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).						
4b. Fee Classification	CGX – Fixed Satellite Transmit/F	Receive Earth Station				
5. Type Request						
• Use Prior to Gran	t O Char	nge Station Location	• Other			
6. Requested Use Prio	r Date					
06/10/2020						
7. CityClifton		8. Latitude	21 49 01 N			
		(dd mm ss.s h)	31 48 0.1 N			

9. State TX	10. Longitude (dd mm ss.s h) 97 36 48.9 W					
11. Please supply any need attachments.						
Attachment 1: Cover letter Attachment 2: Technic	al exhibit 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.)						
 GUSA Licensee LLC (together with its parent Globalstar, Inc., ('Globalstar')) is seeking a 60-day extension of its Special Temporary Authority ('STA') in order to continue to test and validate two waveforms for use in conjunction with Globalstar's licensed gateway earth station at Clifton, Texas. 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 L. Barbee Ponder IV	15. Title of Person Signing General Counsel and VP – Regulatory Affairs					
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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