APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA Application – Kobuk Clinic E210126

1. Applicant

Name: GCI Communication Corp. Phone Number: 907–868–5615

DBA Name: Fax Number: 907–868–9817

Street: 2550 Denali St, Ste 1000 E-Mail: gcilicensemanager@gci.com

City: Anchorage State: AK

Country: USA **Zipcode:** 99503 –2737

Attention: Ms Cynthia L Hall

2. Contact							
N	Name:	GCI Communication Corp.	Phone Nu	ımber:	907–86	58–5615	
C	Company:		Fax Num	ber:	907–86	58–9817	
s	Street:	2550 Denali St, Ste 1000	E–Mail:		chall2@	gci.com	
	784	Amaharaga	State:		AK		
	City:	Anchorage					
	Country:	USA	Zipcode:		99503	-2737	
A	Attention:		Relations	ship:	Same		
(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 SESAMD2021081201399 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 Requ	uest						
6. Requested 08/28/		Pate					
7. CityKobuk			8. Latitude (dd mm ss.s h) 66 54 25.5 N				

9. State AK	10. Longitude (dd mm ss.s h) 156 52 52.6 W						
11. Please supply any need attachments.							
Attachment 1: Exhibit A 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.)							
GCI request Special Temporary Authority to operate the earth station filed under SES-LIC-20210707-01017 filed 7/1/2021, amended on 8/12/2021 file # SES-AMD-20210812-01399							
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 Chris Mace	15. Title of Person Signing VP, Network Services & Chief Engineer						
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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