

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
60 day STA – Ka-band Antenna – E2211 – Port Graham

1. Applicant

Name:	Alascom, Inc.	Phone Number:	202-457-3032
DBA Name:		Fax Number:	202-457-3071
Street:	1120 20th Street, NW Suite 1000	E-Mail:	jackie.flemming@att.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20036 –
Attention:	Jacquelyne Flemming		

2. Contact	
Name: Scott Wood	Phone Number: 907-264-7869
Company: Alascom, Inc.	Fax Number:
Street: 505 E. Bluff MP288	E-Mail:
City: Anchorage	State: AK
Country: USA	Zipcode: 99501 -
Attention:	Relationship:
(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 SESMODINTR201903976 or Submission ID	
4a. Is a fee submitted with this application?	
<input checked="" type="radio"/> If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).	
<input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial educational licensee	
<input type="radio"/> Other(please explain):	
4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station	
5. Type Request	
<input type="radio"/> Use Prior to Grant <input type="radio"/> Change Station Location <input checked="" type="radio"/> Other	
6. Requested Use Prior Date	
7. CityPort Graham	8. Latitude (dd mm ss.s h) 59 21 0.0 N

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