## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: 60–Day STA Continuation (August 2021)

1. Applicant

Name: Alaska Communications Internet, **Phone Number:** 907–297–3000

LLC

**DBA Name:** Fax Number: 907–297–3153

Street: 600 Telephone Avenue E–Mail: Lisa.Phillips@acsalaska.com

MS #60

City: Anchorage State: AK

Country: USA Zipcode: 90503 -

**Attention:** Ms. Lisa Phillips

2. Contact				
Name:	Richard Cameron	Phone Number:	202-230-4962	
Company:	LMI Advisors LLC	Fax Number:		
Street:	2550 M Street	E–Mail:	rcameron@lmiadvisors.com	
	Suite 300			
City:	Washington	State:	DC	
Country:	USA	Zipcode:	20036 –	
Attention:		Relationship:	Other	
application. Please enter 3. Reference File Numb  4a. Is a fee submitted  If Yes, complete and	only one.) oer SESSTA2021060900921 with this application? dattach FCC Form 159. If	or Submission ID  No, indicate reason for fee exemption (see	e number or the IB Submission ID of the related ee 47 C.F.R.Section 1.1114).	
Other(please explain	y Noncommercial edun):	icational needsee		
4b. Fee Classification	CGX – Fixed Satellite Tran	smit/Receive Earth Station		
5. Type Request				
6. Requested Use Prior 3	Date			
7. CityVarious		8. Latitude (dd mm ss.s h) 0	0 0.0	

9. State AK	10. Longitude			
	(dd mm ss.s h) 0 0 0.0			
11. Please supply any need attachments.				
Attachment 1: Narrative Statement	al Appendix 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.)				
Continuation of 60-day STA				
13. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is Yes No				
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.				
See 47 CTR 1.2002(b) for the meaning of equot, party to the application	leequot, for these purposes.			
14 N CD C' '	15 mil CD Ci i			
14. Name of Person Signing Rick Benken	15. Title of Person Signing VP			
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).				
(C.S. Code, The 17, Section 312(u)(1)),11112/ORT ORT EXTERN (C.S. Code, The 17, Section 303).				

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