

## (REFERENCE COPY - Not for submission) Resumption of Operations of an AM Station Application

 File Number:
 0000195694
 Submit Date:
 07/26/2022
 Lead Call Sign:
 KGOL
 Facility ID:
 34473

FRN: 0031307903

 Service:
 Full Power AM
 Purpose:
 Resume Operations
 Status:
 Received
 Status Date:
 07/26/2022
 Filing Status:

 Active
 Status
 Status
 Status Date:
 07/26/2022
 Filing Status:

General Information	Section	Question			Response			
	Attachments	Are attachments (other than associated schedules) being filed with this application?			No			
Applicant Information	Applicant Name, Type, and Contact Information							
monnauon	Applicant	Address	Phone	Email	Applicant Type			
	FM Media Ventures LLC	6161 Savoy Dr. Houston, TX 77036 United States	+1 (713) 545-4115	rehan1999@aol.o	com LLC			
Contact Representatives	Contact Name	Address	Phone	Email	Contact Type			
(1)	<b>Dan J Alpert</b> <i>Legal Counsel</i> The Law Office of Dan J. Alper	2120 21st Rd. N Arlington, VA 22201 t United States	+1 (703) 243-8690	dja@commlaw.	tv Legal Representative			
Station Status	Section	Question			Response			
	Station Status	Date the station resun	ned full power/operation		06/13/2022			

## Certification

The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by authorization or otherwise, and requests an Authorization in accordance	
with this application (See Section 304 of the Communications Act of 1934, as amended.).	

	The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1. 2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification § 1.2002(c). The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.	
Authorized Party to Sign	<ul> <li>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</li> <li>Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements.</li> <li>Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization.</li> <li>Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application.</li> <li>WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, §1001)</li> <li>AND/OR REVOCATION OF ANY STATION</li> <li>AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND /OR FORFEITURE (U.S. Code, Title 47, §503).</li> </ul>	
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	Dan J Alpert Legal Counsel 07/26/2022

File Name	Uploaded By	Attachment Type	Description	Upload Status
PARAMETERS FOR RESUMPTION.pdf	Applicant			Done with Virus Scan and/or Conversion