

(REFERENCE COPY - Not for submission) Full Power FM Restoration of License Operation Notification

File Number:0000222686Submit Date:10/11/2023Lead Call Sign:WJLRFacility ID:24623

FRN: 0004121000

Service: Full Power FMPurpose: Restoration of License Operation NotificationStatus: ReceivedStatus Date:10/11/2023Filing Status: Inactive

General Information	Section	Question			Response	
	Attachments	Are attachments (other t filed with this application	No			
Applicant	Applicant Name, Type, a	and Contact Informati	ion			
Information	Applicant	Address	Phone	Email		Applicant Type
	EDUCATIONAL MEDIA FOUNDATION Doing Business As: EDUCATIONAL MEDIA FOUNDATION	5700 WEST OAKS BOULEVARD ROCKLIN, CA 95765 United States	+1 (916) 251-1600	EFILE@EMFBROADCASTING. COM		NFP
Contact Representatives (2)	Contact Name	Address	Phone	Email C		Contact Type
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	JAMES TRAVIS FCC COMPLIANCE ENGINEER EDUCATIONAL MEDIA FOUNDATION, LLC	5700 WEST OAKS BLVD ROCKLIN, CA 95765 United States	+1 (916) 251-1600	EFILE@EMFBROADCASTING. COM		Technical Representative
Station Status	Section	Question			Response	•
	Station Status	Date the station Restored License Operation:			10/10/2023	3
Certification	Section	Question			Response	•

Section	Question	Response
General Certification Statements	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	 FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application. WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND /OR FORFEITURE (U.S. Code, Title 47, §503). 	
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	Matt Reynolds Acting Chief Financial Officer

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
WJLR Resumption of Operations Applicant			Restoration	Done with Virus Scan and/or
Exhibitpdf			Exhibit	Conversion