



(REFERENCE COPY - Not for submission)

Notification of Consummation

File Number: **0000158257** | Submit Date: **09/01/2021** | Lead Call Sign: **WSHA** | FRN: **0002148864**
 Service: **Full Power FM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **09/02/2021** |
 Filing Status: **Active**

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

Applicant	Address	Phone	Email	Applicant Type
EDUCATIONAL MEDIA FOUNDATION Doing Business As: EDUCATIONAL MEDIA FOUNDATION	5700 WEST OAKS BLVD. ROCKLIN, CA 95765 United States	+1 (916) 251-1600	EFILE@EMFBROADCASTING.COM	Not-for-Profit

Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
David D Oxenford WILKINSON BARKER KNAUER, LLP	1800 M. STREET, N.W., SUITE 800 WASHINGTON, DC 20036 United States	+1 (202) 783-4141	doxenford@wbklaw.com	Legal Representative

Consummation Notification Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2021-08-31	0002148864

Consume the Following Authorizations:

Select all the authorizations in the table below that will **not be consummated**

Call Sign	Facility ID	File Number	Will Not Consume
WSHA	90986	0000145774	

Certification

Section	Question	Response
Authorized Party to Sign	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.	Jon Reeves CEO 09/01/2021

Attachments

Information not provided.