

(REFERENCE COPY - Not for submission) Full Power FM Engineering STA Application

 File Number:
 BSTA-20120217ABT
 Submit Date:
 02/17/2012
 Lead Call Sign:
 WJKL
 Facility ID:
 19221

FRN: 0004121000

Waivers

 Service:
 Full Power FM
 Purpose:
 Engineering STA
 Status:
 Granted
 Status Date:
 02/21/2012
 Filing Status:

 Inactive
 Inacti

| General Information | Section | Question | Response | |
|------------------------|-------------|--|----------|--|
| | Attachments | Are attachments (other than associated schedules) being filed with this application? | | |
| | | | | |
| Fees, Waivers, | Section | Question | Deenenee | |
| and Exemptions | occion | | Response | |
| and Exemptions | Fees | Is the applicant exempt from FCC application Fees? | Yes | |

| Applicant |
|-------------|
| Information |

Applicant Name, Type, and Contact Information

(s)?

| Applicant | Address | Phone | Email | Applicant Type |
|---|--|----------------------|-------------------------|----------------|
| EDUCATIONAL MEDIA FOUNDATION Applicant Doing Business As: EDUCATIONAL MEDIA FOUNDATION | 5700 WEST OAKS BLVD. ROCKLIN, CA 95765 United States | +1 (916) 251-1600 | EFILE@KLOVEAIR1. COM | ОТН |

Is the applicant exempt from FCC regulatory Fees?

Does this filing request a waiver of the Commission's rule

Total number of rule sections involved in this waiver request:

Contact Representatives (2)

| Contact Name | Address | Phone | Email | Contact Type |
|--|---|----------------------|-------------------------------|-----------------------------|
| SAM WALLINGTON VICE PRESIDENT OF ENGINEERING | 5700 WEST OAKS BLVD ROCKLIN, CA 95765 United States | +1 (916) 251-1600 | EFILE@EMFBROADCASTING. COM | Technical Representative |
| KAREN A. ROSS, ESQ. DAVIS WRIGHT TREMAINE LLP | 1919 PENNSYLVANIA AVENUE, NW SUITE 800 WASHINGTON, DC 20006-3401 United States | +1 (202) 973-4200 | KARENROSS@DWT.COM | Legal Representative |

| STA Purpose | |
|-------------|--|
|-------------|--|

Certification

| 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. | MIKE NOVAK |

Attachments

| File Name | Uploaded By | Attachment Type | Description | Upload Status |
|---|-------------|-----------------|---------------------------|---|
| <u>1488396_1023710.txt</u> | Applicant | All Purpose | WJKL STA JUSTIFICATION | Done with Virus Scan and/or Conversion |
| <u>D:\data\prod\cdbs\letters\\31\A-1488396</u> F- 19221 L-31926-BSTA-20120217ABT.pdf | Internal | All Purpose | imported letter | Done with Virus Scan and/or Conversion |