

(REFERENCE COPY - Not for submission) Request to Extend a Silent Authority of a Full Power FM Station Application

File Number: BLESTA-20060214AAJ | Submit Date: 02/14/2006 | Lead Call Sign: WKDS | Facility ID: 4198

FRN: 0007316185

Service: Full Power FM | Purpose: STA Extension | Status: Granted | Status Date: 02/21/2006 | Filing Status: Active

General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
KALAMAZOO PUBLIC SCHOOLS Applicant Doing Business As: KALAMAZOO PUBLIC SCHOOLS	606 KILGORE ROAD KALAMAZOO, MI 49001 United States	+1 (269) 337-0220	DAHLCS@KALAMAZOO. K12.MI.US	ОТН

Contact Representatives (1)

Contact Name	Address	Phone	Email	Contact Type
DAVID TILLOTSON LAW OFFICE OF DAVID TILLOTSON	4606 CHARLESTON TERRACE, N.W. WASHINGTON, DC 20007 United States	+1 (202) 625- 6241	DTLAW@STARPOWER. NET	Legal Representative

Extension Request

Section	Question	Response
Extension Request	Reason for going silent:	Financing
	Please enter the new requested expiration date:	

Certification

General Certification The Applic		
Statements frequency regulatory previous u otherwise, with this a	cant waives any claim to the use of any particular or of the electromagnetic spectrum as against the power of the United States because of the see of the same, whether by authorization or and requests an Authorization in accordance oplication (See Section 304 of the sations 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.

JANICE M. BROWN

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>1114617 377306.</u> <u>txt</u>	Applicant	All Purpose	REASON FOR REQUEST	Done with Virus Scan and/or Conversion