

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

Submit Date: 07/31/2012 | Lead Call Sign: WGBQ | Facility ID: 171691 File Number: BLESTA-20120731AFI

FRN: 0005025911

Service: Full Power FM Purpose: STA Extension Status: Granted Status Date: 08/01/2012 Filing Status: Active

General Information	Section	Quest	Question			Response	
	Attachments		Are attachments (other than associated schedules) being filed with this application?				
Applicant	Applicant Name, Type	e, and Cor	ntact Inform	ation			
Information	Applicant	Ad	dress	Phone	Email		Applicant Type
	NETWORK OF GLORY, INC. Applicant Doing Business As: NETWORK OF GLORY, INC.		OST OFFICE +1 (864) OX 10916 979-3439 REENVILLE, SC 603 ited States		INFO@NETWORKOFGLORY ORG		. OTH
Contact Representatives (1)	Contact Name	Address		Phone	Email		Contact Type
	<b>LOLA RICHEY</b> NETWORK OF GLORY, INC.	102 RED BRANCH LANE SIMPSONVILLE, SC 29681 United States		+1 (864) 979- 3439	LOLARICHEY@BELLSOUTH. NET		Legal Representative
Extension Request	Section	Quest	ion		Response		
	Extension Request	Reaso	on for going sile	Financing			
	Please enter the new requested expiration d				tion date:		

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	<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.	LOLA STRADFORD RICHEY

## Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>1510097_1053821.txt</u>	Applicant	All Purpose	REASON	Done with Virus Scan and/or Conversion
D:\data\prod\cdbs\letters\\36\A-1510097_F- 171691_L-36168-BLESTA-20120731AFI.pdf	Internal	All Purpose	imported letter	Done with Virus Scan and/or Conversion