

(REFERENCE COPY - Not for submission)

Resumption of Operations of an Analog LPTV Station Application

File Number:	Submit Date: 10/28/2009	Call Sign: WVEX-LF	• Facility ID: 125125	FRN: 0018223693	State:	
West Virginia	City: PARKERSBURG					
Service: LPA	Purpose: Resume Operations	Status: Granted	Status Date: 10/29/2009	Expiration Date:		
Filing Status: Active						

General Information	Section Question		Response				
Applicant	Applicant Name, Type, and Contact Inf	Applicant Name, Type, and Contact Information					
Information				Applicant			
	Applicant	Address	Phone	Email Type			
	WOOD INVESTMENTS, LLC	424 OLD GOLF MOUNTAIN	+1 (304) 539-	Other			
	Applicant	ROAD	2809				
	Doing Business As: WOOD INVESTMENTS,	CROSS LANES, WV 25313					
	LLC	United States					
	Authorization Holder Name						

Check box if the Authorization Holder name is being updated because of the sale (or transfer of control) of the Authorization(s) to another party and for which proper Commission approval has not been received or proper notification provided.

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives (1)	LEE PELTZMAN SHAINIS & PELTZMAN CHARTERED	1850 M STREET NW #240 WASHINGTON, DC 20036 United States	+1 (202) 293- 0011	LEE@S-PLAW. COM	Legal Representative

Station Status	Question	Response
	Resuming Power Operations:	
	Date Station Resumed Power	

General Certification Statements The Applicant waives any claim to the use of any particular frequency or the electromagnetic spectrum as against the previous use of the same, whether by authorization or otherwise, and requests an Authorization is accordance with this application (See Section 304 of the Communications Act of 1924, as amended.). The Applicant cortifies that neither the Applicant nor any other party to the application is subject to a denial of Foderal benefits pursuant to \$503 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 service exempted under \$1,2002(c) of the rules, 47 CFR \$1,5002(b), for the definition of "party to the application and used in this cortification \$1,2002; (c). The Applicant cortifies that all statements made in this application, and are true, complete, correct, and made in application, and are true, complete, correct, and made in application and in the achibits, attachments, or documents in lancomparise PCC regulations to determine the construction or coverage requirements. Failure to meet the construction or coverage requirements will neutomatic construction or coverage requirements. Failure to meet the construction or coverage requirements. Failure to meet the construction or coverage requirements in the construction or coverage requirements. Failure to meet the construction or coverage requirements. Failure to meet the construction or coverage requirements. Failure to meet the construction or coverage requirements. F	Certification	Section	Question	Response
other party to the application is subject to a denial of Federal benefits pursuant to §3001 of the AniD-Torg Abuse Act of 1988, 21 U.S. Ç \$862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications flied in services exempted under §1.2002(b) of the rules, 47 CFR §e §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. 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. Failure to meet the construction or coverage requirements. Failure to meet the construction or coverage requirements. Failure to Methorization. Consult appropriate FCC regulations to determine the construction or coverage requirements. Failure to Result appropriate FCC regulations to determine the construction or coverage requirements. For MUNOR ANY ATTACHMENTS ARE PUNNELANDE ON THIS FORM OR ANY ATTACHMENTS ARE PUNNELAND (D.S. Code, Title 47, §512(a)(1), AND/OR FORFEITURE (U.S. Code, Title 47, §503). I certify that this application includes all required and relevant attachments.			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	
DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAIDUpon 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 certify that this application includes all required and relevant attachments.			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	
relevant attachments.		Authorized Party to Sign	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.	
			relevant attachments.	RICHARD A. DAUGHERTY

Attachments	File Name	Uploaded By	Attachment Type	Description
	<u>1340081_802429.txt</u>	Applicant	All Purpose	PARAMETERS