

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0386 (July 2002)	FOR FCC USE ONLY
Resumption of Operations		FOR COMMISSION USE ONLY FILE NO.
Read Instructions/FAQ before filling out form		

Section I - General Information

1.	Legal Name of the Applicant EVANGEL WORLD PRAYER CENTER OF KENTUCKY, INC.									
	Mailing Address 6900 BILLTOWN ROAD									
	<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">City LOUISVILLE</td> <td style="width: 33%;">State or Country (if foreign address) KY</td> <td style="width: 33%;">Zip Code 40299 -</td> </tr> <tr> <td colspan="2">Telephone Number (include area code) 5029642121</td> <td>E-Mail Address (if available) TOM@WBNA21.COM</td> </tr> <tr> <td>Call Sign WJDE-LD</td> <td colspan="2">Facility ID Number 61026</td> </tr> </table>	City LOUISVILLE	State or Country (if foreign address) KY	Zip Code 40299 -	Telephone Number (include area code) 5029642121		E-Mail Address (if available) TOM@WBNA21.COM	Call Sign WJDE-LD	Facility ID Number 61026	
City LOUISVILLE	State or Country (if foreign address) KY	Zip Code 40299 -								
Telephone Number (include area code) 5029642121		E-Mail Address (if available) TOM@WBNA21.COM								
Call Sign WJDE-LD	Facility ID Number 61026									
2.	Contact Representative (if other than licensee/permittee) ANTHONY T. LEPORE									
	Firm or Company Name									
	Mailing Address 4101 ALBEMARLE ST NW #324									
	<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">City WASHINGTON</td> <td style="width: 33%;">State or Country (if foreign address) DC</td> <td style="width: 33%;">ZIP Code 20016 - 2151</td> </tr> <tr> <td colspan="2">Telephone Number (include area code) 2026812201</td> <td>E-Mail Address (if available) ANTHONY@RADIOTVLAW.NET</td> </tr> </table>	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20016 - 2151	Telephone Number (include area code) 2026812201		E-Mail Address (if available) ANTHONY@RADIOTVLAW.NET			
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Telephone Number (include area code) 2026812201		E-Mail Address (if available) ANTHONY@RADIOTVLAW.NET								
3.	Purpose:									
	<input type="radio"/> Notification of Suspension of Operations									
	<input type="radio"/> Notification of Suspension of Operations and Request for Silent STA									
	<input type="radio"/> Request for Silent STA									
	<input type="radio"/> Request to Extend STA									
	<input checked="" type="radio"/> Resumption of Operations									
4.	Community of License: City: NASHVILLE State: TN									
5.	Date station went silent: 6/10/2013									
6.	Date station commenced operation: 6/21/2013 (mm/dd/yyyy)									
7.	Please explain under which parameters the facility commenced operations (i.e. license, technical sta, construction permit)									
	[Exhibit 3]									

I hereby certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations.

Typed or Printed Name of Person Signing TOM FAWBUSH	Typed or Printed Title of Person Signing GENERAL MANAGER
Signature	Date (mm/dd/yyyy) 6/22/2013

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

Exhibit 3

Description: WJDE RESUMPTION OF OPERATIONS

WJDE-LD HAS RESUMED OPERATIONS PURSUANT TO LICENSED PARAMETERS AFTER COMPLETING INSTALLATION OF NEW EQUIPMENT.

Attachment 3
