

Applicant I Licensee Information

1) First Name (if Individual)	MI	Last Name.	suffix
Jim		Doering	
2) Applicant Name (if entity):		3) FCC Registration Number (FRN)	
dba J. Doering Communications		0004119582	

Related FCC Regulated Businesses of Applicant I Licensee

4a) Name and address of all FCC Regulated Businesses owned by Applicant/ Licensee (use additional sheets. if necessary):	4b) Principal Business.	4c) FCC Registration Number (FRN):	4d) Percent of Interest Held
J. Doering Communications 150 W. Naomi Avenue Arcadia, CA. 91007	Communications'	0004119582	100%

**Signature
5 Typed or Printed Name of Party Authorized to Sign**

First Name.	MI.	Last Name:	suffix:
Tim		Doering	
Title:			
Owner			

Signature: <i>Jim Doering</i>	Date: 12/26/2001
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Failure to Sign This Application May Result in Dismissal Of The Application And Forfeiture Of Any Fees Paid

WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AN&OR IMPRISONMENT (U.S. Code, Title 16, 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).

1/8/2 BSS