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**Federal Communications Commission  
Public Safety and Homeland Security Bureau**

**RADIO STATION AUTHORIZATION**

LICENSEE: CALIFORNIA, STATE OF

ATTN: RADIO LICENSING  
CALIFORNIA, STATE OF  
601 SEQUOIA PACIFIC BLVD  
SACRAMENTO, CA 95811-0231

<b>Call Sign</b> KEO387	<b>File Number</b>
<b>Radio Service</b> PW - Public Safety Pool, Conventional	
<b>Regulatory Status</b> PMRS	
<b>Frequency Coordination Number</b>	

FCC Registration Number (FRN): 0001724541

<b>Grant Date</b> 09-04-2013	<b>Effective Date</b> 09-04-2013	<b>Expiration Date</b> 11-14-2023	<b>Print Date</b>
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**STATION TECHNICAL SPECIFICATIONS**

**Fixed Location Address or Mobile Area of Operation**

**Loc. 1 Address:** 3530 W POMONA BLVD  
**City:** POMONA **County:** LOS ANGELES **State:** CA  
**Lat (NAD83):** 34-02-31.0 N **Long (NAD83):** 117-48-26.2 W **ASR No.:** **Ground Elev:** 210.0

**Antennas**

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000153.7550000	FB	1		11K2F3E	40.000	40.000	11.0		

**Control Points**

**Control Pt. No. 1**

**Address:** 3530 W POMONA BLVD  
**City:** POMONA **County:** **State:** CA **Telephone Number:** (916)657-9999

**Associated Call Signs**

**Conditions:**

Pursuant to §309(h) of the Communications Act of 1934, as amended, 47 U.S.C. §309(h), this license is subject to the following conditions: This license shall not vest in the licensee any right to operate the station nor any right in the use of the frequencies designated in the license beyond the term thereof nor in any other manner than authorized herein. Neither the license nor the right granted thereunder shall be assigned or otherwise transferred in violation of the Communications Act of 1934, as amended. See 47 U.S.C. § 310(d). This license is subject in terms to the right of use or control conferred by §706 of the Communications Act of 1934, as amended. See 47 U.S.C. §606.

**Licensee Name:** CALIFORNIA, STATE OF

**Call Sign:** KEO387

**File Number:**

**Print Date:**

<NA>

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**Waivers/Conditions:**

Authorization on a secondary basis.

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