

RECOGNIZED OPERATING AGENCY FILING
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APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu

ILLINOIS LOTTERY

1. Applicant			
Name:	ILLINOIS LOTTERY, http	Phone Number:	224-356-4947
DBA Name:		Fax Number:	224-356-4947
Street:	PO BOX 1112	E-Mail:	BRAINBRAIN@USA.COM
City:	WOODSTOCK	State:	IL
Country:	USA	Zipcode:	60098 -1112
Attention:	Ms BRAIN GAYLORD		

2. Contact

Name:	BRAIN GAYLORD	Phone Number:	224-356-4947
Company:	BRAIN BRAIN	Fax Number:	224-356-4947
Street:	PO BOX 1112	E-Mail:	BRAINBRAIN@USA.COM
City:	WOODSTOCK	State:	IL
Country:	USA	Zipcode:	60098 -1112
Attention:	BRAIN BRAIN	Relationship:	Same

3. Other Company(ies) Involved in Application

STATE OF ILLINOIS

4. Destination Country USA

5. Place of Incorporation STATE OF ILLINOIS

6. Is a fee submitted with this application?

If Yes, complete and attach FCC Form 159.

If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114).

Governmental Entity Noncommercial educational licensee

Other(please explain):

7. Attachment 1: FCN	Attachment 2:	Attachment 3:
8. Is the agency an Enhanced Service Provider?	<input checked="" type="radio"/> Yes	<input type="radio"/> No
9. Is the agency a Common Carrier?	<input checked="" type="radio"/> Yes	<input type="radio"/> No
10. If you answered "Yes" to questions 8 or 9, please check if required attachments are included in the filing.	<input checked="" type="radio"/> Yes <input type="radio"/> N/A	<input type="radio"/> No
11. Operator of radio frequency equipment capable of causing harmful interference internationally (Rule Part 63.701)?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
12. I am aware that my company is bound by all laws and obligations of the United States, including Article 6 of the Constitution of the International Telecommunications Union and all binding telecommunications regulations promulgated thereunder. My company will obey those obligations in all respects.	<input checked="" type="radio"/> Yes	<input type="radio"/> No

FOREIGN AFFILIATION

13. Affiliation (a): A greater than 25 percent ownership of capital stock, or controlling interest at any level, by the applicant, or by any entity that directly or indirectly controls or is controlled by it, or that is under direct or indirect common control with it, in a foreign carrier or in any entity that directly or indirectly controls a foreign carrier.	<input checked="" type="radio"/> Yes	<input type="radio"/> No
14. Affiliation (b): A greater than 25 percent ownership of capital stock, or controlling interest at any level, in the applicant by a foreign carrier, or any entity that directly or indirectly controls or is controlled by a foreign carrier, or that is under direct or indirect common control with a foreign carrier; or by two or more foreign carriers investing in the applicant in the same manner in circumstances where the foreign carriers are parties to, or the beneficiaries of a contractual relation.	<input checked="" type="radio"/> Yes	<input type="radio"/> No

BASIC QUALIFICATIONS

15. By checking Yes, the undersigned certifies, that neither applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.	<input checked="" type="radio"/> Yes	<input type="radio"/> No
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16. Description. (Summarize the nature of the application and the services to be provided).

(If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)

CARRIER

CERTIFICATION

17. Typed Name of Person Signing
BRAIN GAYLORD

18. Title of Person Signing
CARRIER

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT
(U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION
(U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).

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