

Administrative Update for an FM Station Application

File Number: 0	000130804 Submit Date:	01/08/2021	Call Sign: KVSS	Facility ID: 34435	FRN: 0005027891	State:
Nebraska City: PAPILLION						
Service: FM	Purpose: Administrativ	e Update	Status: Received	Status Date: 01/08/2021	Filing Status: Activ	ve

General	Section Question			Response			
Information							
Applicant	Applicant Name, Type, and Contact Information						
Information	Annella and		Adduces	Dhama	En all	Applicant	
	Applicant		Address	Phone	Email	Туре	
	VSS Catholic Communication	ons, Inc	Jim Carroll	+1 (402) 571-	jimc@kvss.	Not-for-Profit	
	Doing Business As: VSS Cath	olic	13326 'A' Street	0200	com		
	Communications, Inc		Omaha, NE				
			68144				
			United States				

Contact Representatives (2)	Contact Name	Address	Phone	Email	Contact Type
	John Wells King <i>Legal Representative</i> Law Office of John Wells King, PLLC	4051 Shoal Creek Lane East Jacksonville, FL 32225 United States	+1 (904) 647- 9610	john@jwkinglaw. com	Legal Representative
	Mark H Voris <i>Chief Engineer</i> VSS Catholic Communictions, Inc	13326 A Street Omaha, NE 68144 United States	+1 (402) 571- 0200	mark@kvss.com	Technical Representative

Certification	Section	Question	Response
	General Certification Statements	The Applicant waives any claim to the use of any particular 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 of 1934, as amended.).	
		The Applicant certifies that neither the Applicant nor any 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 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 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.	Yes
		I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	James M Carroll Executive Director 01/08/2021

Information not provided.

Attachments