

# Federal (REFERENCE COPY - Not for submission) Communications Operations

Name

Not Applicable

# Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000046232Submit Date:2018-03-01FRN:0005017173Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status: Date:03/01/2018Filing Status:ActiveStatus:ActiveStatus:Status:

# **Section I - General Information**

#### 1. Respondent

FRN	Entity Name
0020095030	Food Safety Services, LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 1511	Great Bend	KS	67530	+1 (620) 232- 5993	sharon@mytown- media.com

#### 2. Contact Representative

JOHN S. LOGAN, ESQ.	COOLEY LLP

Organization

	City (and Country if non U.S.		Zip		
Street Address	address)	State	Code	Phone	Email
1299 PENNSYLVANIA AVENUE, NW	WASHINGTON	DC	20004	+1 (202) 776- 2640	JLOGAN@COOLEY. COM

### 3. Application Filing Fee

# Filing Fee

# 4. Nature of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees		
Nature of Respondent	Other Entity with an attributable interest		

(b) Provide the following information about this report:

Purpose	Biennial
"As of" date	10/01/2017
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name			FRN		
Post Rock Radio, LLC			0019483247		
Fac. ID No.	Call Sign	City		State	Service
164130	ККДТ	BURDETT		KS	FM
164131	KXNC	NESS CITY		KS	FM

### Section II – Biennial Ownership Information

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select "Not Applicable" in response to this question.

Not Applicable.

#### 2. Ownership Interests

1.47 C.F.R.

and Other

Documents

Section 73.3613

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated partners, non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

FRN	0020095030	
Entity Name	Food Safety Services, LLC	
Address	PO Box	1511
	Street 1	
	Street 2	
	City	Great Bend
	State ("NA" if non-U.S. address)	KS
	Zip/Postal Code	67530
	Country (if non-U.S. address)	United States

#### **Ownership Information**

Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No

Ownership Information				
FRN	0020094728			
Name	Richard A. Ball			
Address	PO Box	1511		
	Street 1			
	Street 2			
	City	GREAT BEND		
	State ("NA" if non-U.S. address)	KS		
	Zip/Postal Code	67530		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member, Other - MANAGER			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	29.0% Jointly Held? No		
from 0.0 to 100.0)	Equity	29.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No	

**Ownership Information** 

FRN 0020094736

Name	Leon H. Borck			
Address	PO Box	1511		
	Street 1			
	Street 2			
	City	GREAT BEND		
	State ("NA" if non-U.S. address)	KS		
	Zip/Postal Code	67530		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	LC/LLC/PLLC Member			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	24.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	24.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No	

# **Ownership Information**

FRN	0020095097		
Entity Name	Arrowood Cattle Co., Inc.		
Address	PO Box	1511	
	Street 1		
	Street 2		
	City	GREAT BEND	
	State ("NA" if non-U.S. address)	KS	
	Zip/Postal Code	67530	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	LC/LLC/PLLC Member		

Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	24.0%	Jointly Held? No
	Equity	24.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

#### **Ownership Information**

FRN	0020095113		
Entity Name	Integrated Management Services, Inc.		
Address	PO Box	1511	
	Street 1		
	Street 2		
	City	GREAT BEND	
	State ("NA" if non-U.S. address)	KS	
	Zip/Postal Code	67530	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	15.0%	Jointly Held? No
	Equity	15.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

#### **Ownership Information**

FRN	0020094876	
Name	John Butler	
Address	PO Box	1511
	Street 1	
	Street 2	
	City	GREAT BEND

	State ("NA" if non-U.S. address)	KS	
	Zip/Postal Code	67530	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.0%	Jointly Held? No
	Equity	7.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have	an attributable interest in one c	or more broadcast stations	No

that do not appear on this report?

**Ownership Information** FRN 0020094884 Name Heather Donley Address PO Box 1511 Street 1 Street 2 City **GREAT BEND** State ("NA" if non-U.S. KS address) 67530 Zip/Postal Code Country (if non-U.S. **United States** address) Other Interest Holder Listing Type **Positional Interests** LC/LLC/PLLC Member (check all that apply) Citizenship, Gender, US Citizenship Ethnicity, and Race Gender Female Information (Natural Persons Only) Ethnicity Not Hispanic or Latino White Race Jointly Held? Interest Percentages Voting 1.0% (enter percentage values No from 0.0 to 100.0)

	Equity	1.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No
(b) Respondent certifies that any interests including equity financial or voting Yes			

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
If "No," submit as an exhibit an explanation.	

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?	No
If " <u>Yes</u> ," provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below.	
Respondents with a large number (50 or more) of entries to	
submit should use the spreadsheet option.	
NOTE: Spreadsheets must be submitted in a special XML	
Spreadsheet format with the appropriate structure that is	
specified in the documentation. For instructions on how to	
use the spreadsheet option to complete this question	
(including templates to start with), please Click Here.	
If using the subform, leave the percentage of total assets	
(Equity Debt Plus) field blank for an interest holder unless	
that interest holder has an attributable interest in the	
newspaper entity solely on the basis of the Commission's	
Equity Debt Plus attribution standard, 47 C.F.R. Section	
73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA"	
into the percentage of total assets (Equity Debt Plus) field	
for an interest holder unless that interest holder has an	
attributable interest in the newspaper entity solely on the	
basis of the Commission's Equity Debt Plus attribution	
standard.	
The Respondent must provide an FCC Registration Number	
for each interest holder reported in response to this	
question. Please see the Instructions for detailed information	
and guidance concerning this requirement.	

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other No or related to each other as parentchild or as siblings?

If " $\underline{Yes},$ " provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If " <u>Yes</u> ," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be	
attributed an interest.	

### Certification

Section	Question	Response
Authorized Party to Sign	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 LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: <b>Manager</b> Exact Legal Title or Name of Respondent: <b>Food Safety Services, LLC</b> Name: <b>Richard A. Ball</b> Phone: <b>6202325993</b> 03/01/2018