

## (REFERENCE COPY - Not for submission) Form 380 - Exchange Request

File Number:0000240765Submit Date:03/13/2024Lead Call Sign:KXCAFRN:0010210235Service:Full Power AMPurpose:Call Sign Request (Exchange)Status:GrantedStatus Date:03/19/2024Filing Status:Active

| General<br>Information | Section     | Question   | Response |
|------------------------|-------------|--|----------|
|                        | Attachments | Are attachments (other than associated schedules) being filed with this application? | No       |

## Fees, Waivers, and Exemptions

| Section | Question  | Response |
|---------|---|----------|
| Fees    | Is the applicant exempt from FCC application Fees?              | No       |
|         | Indicate reason for fee exemption:                              |          |
|         | Is the applicant exempt from FCC regulatory Fees?               | No       |
| Waivers | Does this filing request a waiver of the Commission's rule (s)? | No       |
|         | Total number of rule sections involved in this waiver request:  |          |

| Application Type             | Call Sign | Facility ID | Fee Code | Fee Amount |
|------------------------------|-----------|-------------|----------|------------|
| Call Sign Request (Exchange) | KXCA      | 50213       | MBR      | \$380.00   |
|                              |           |             | Total    |            |

## Applicant Information

## Applicant Name, Type, and Contact Information

| Applicant  | Address  | Phone                | Email                        | Applicant Type |
|--|--|----------------------|------------------------------|----------------|
| MOLLMAN MEDIA, INC.<br>Doing Business As:<br>MOLLMAN MEDIA, INC. | Matthew Mollman<br>627 WEST<br>CHICKASHA AVE.<br>CHICKASHA, OK<br>73018<br>United States | +1 (405)<br>224-1560 | MATTHEW@MOLLMANMEDIA.<br>COM | Company        |

| Contact<br>Representatives | Contact Name  | Address   | Phone                 | Email                    | Contact Type            |
|----------------------------|---|---|-----------------------|--------------------------|-------------------------|
| (1)                        | <b>David D Oxenford</b><br><i>Legal Representive</i><br>Wilkinson Barker Knauer,<br>LLP | David D Oxenford<br>1800 M Street Suite 800N<br>Washington DC, DC 20036-<br>0001<br>United States | +1 (202) 783-<br>4141 | DOxenford@wbklaw.<br>com | Legal<br>Representative |
| Call Sign<br>Request       | Section   | Question  |                       | Respo                    | onse                    |
|                            | Exchange Request  | Effective Date  |                       | 03/19/                   | 2024                    |

| Licensee 1 Current Call Sign  | КХСА |
|---|------|
| Licensee 1 Requested Call Sign  | КХСА |
| Licensee 2 Current Call Sign  | KXCA |
| Licensee 2 Requested Call Sign  | KKRX |
| I certify that the document attached demonstrates a legally binding contract of call sign transfer. | Yes  |

| Certification | Section                             | Question   | Response |
|---------------|-------------------------------------|--|----------|
|               | General Certification<br>Statements | The Applicant waives any claim to the use of any particular<br>frequency or of the electromagnetic spectrum as against the<br>regulatory power of the United States because of the<br>previous use of the same, whether by authorization or<br>otherwise, and requests an Authorization in accordance<br>with this application (See Section 304 of the<br>Communications Act of 1934, as amended.).  |          |
|               |                                     | The Applicant certifies that neither the Applicant nor any<br>other party to the application is subject to a denial of<br>Federal benefits pursuant to §5301 of the Anti-Drug Abuse<br>Act of 1988, 21 U.S.C. § 862, because of a conviction for<br>possession or distribution of a controlled substance. This<br>certification does not apply to applications filed in services<br>exempted under §1.2002(c) of the rules, 47 CFR . See §1.<br>2002(b) of the rules, 47 CFR § 1.2002(b), for the definition<br>of "party to the application" as used in this certification §<br>1.2002(c). The Applicant certifies that all statements made<br>in this application and in the exhibits, attachments, or<br>documents incorporated by reference are material, are part<br>of this application, and are true, complete, correct, and<br>made in good faith. |          |
|               | Authorized Party to Sign            | FAILURE TO SIGN THIS APPLICATION MAY RESULT IN<br>DISMISSAL OF THE APPLICATION AND FORFEITURE<br>OF ANY FEES PAID<br>Upon grant of this application, the Authorization Holder may<br>be subject to certain construction or coverage requirements.<br>Failure to meet the construction or coverage requirements<br>will result in automatic cancellation of the Authorization.<br>Consult appropriate FCC regulations to determine the<br>construction or coverage requirements that apply to the type<br>of Authorization requested in this application.<br>WILLFUL FALSE STATEMENTS MADE ON THIS FORM<br>OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE<br>AND/OR IMPRISONMENT (U.S. Code, Title 18, §1001)<br>AND/OR REVOCATION OF ANY STATION<br>AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND<br>/OR FORFEITURE (U.S. Code, Title 47, §503).         |          |

Certification

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

Matthew Mollman President

03/13/2024

| Attachments |
|-------------|
|-------------|

| File Name                                    | Uploaded By | Attachment Type     | Description | Upload Status                             |
|--|-------------|---------------------|-------------|---|
| <u>Mollman Call Sign Swap.</u><br><u>pdf</u> | Applicant   | Exchange<br>Request |             | Done with Virus Scan and/or<br>Conversion |