



(REFERENCE COPY - Not for submission)

# Digital Class A Legal STA Application

File Number: **0000034424** | Submit Date: **10/30/2017** | Call Sign: **KEFN-CD** | Facility ID: **9375** | FRN: **0009273525** | State: **Missouri** | City: **ST. LOUIS**  
Service: **DCA** | Purpose: **Legal STA** | Status: **Superseded** | Status Date: **11/01/2017** | Filing Status: **InActive**

## General Information

Section	Question	Response
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## Fees, Waivers, and Exemptions

Section	Question	Response
<b>Fees</b>	Is the applicant exempt from FCC application Fees?	Yes
	Indicate reason for fee exemption:	Non-profit entity broadcasting non-commercial programming (47 CFR Sec. 1.1116(c))
<b>Waivers</b>	Does this filing request a waiver of the Commission's rule(s)?	Yes
	Total number of rule sections involved in this waiver request:	1

**Applicant  
Information**

**Applicant Name, Type, and Contact Information**

<b>Applicant</b>	<b>Address</b>	<b>Phone</b>	<b>Email</b>	<b>Applicant Type</b>
<b>ETERNAL FAMILY NETWORK</b> Doing Business As: ETERNAL FAMILY NETWORK	THOMAS A. FEDERER, ESQ C/O THOMAS A. FEDERER, ESQ 201 SOUTH FIFTH STREET ST. LOUIS, MO 63301 United States	+1 (636) 949- 2424	tom@federerlaw. com	Not-for- Profit

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**Authorization Holder Name**

Check box if the Authorization Holder name is being updated because of the sale (or transfer of control) of the Authorization(s) to another party and for which proper Commission approval has not been received or proper notification provided.

**Contact  
Representatives  
(2)**

Contact Name	Address	Phone	Email	Contact Type
<b>Louis R duTreil , Jr .</b> <i>Technical Consultant</i> duTreil Lundin & Rackley Inc	3135 Southgate Circle Sarasota, FL 34239 United States	+1 (941) 329- 6004	bobjr@DLR.com	Technical Consultant
<b>Dennis J. Kelly , Kelly .</b> <i>Attorney at Law</i> LAW OFFICE OF DENNIS J. KELLY	PO Box 41177 Washington, DC 20018 United States	+1 (202) 293- 2300	dkellyfclaw1 @comcast. net	Legal Representative

**Channel and Facility Information**

Section	Question	Response
Facility ID	9375	
State	Missouri	
City	ST. LOUIS	
DCA Channel	49	

**Certification**

Section	Question	Response
<p><b>General Certification Statements</b></p>	<p>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.).</p>	
	<p>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.</p>	
<p><b>Authorized Party to Sign</b></p>	<p><b>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</b></p> <p>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.</p> <p>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).</p>	
	<p>I certify that this application includes all required and relevant attachments.</p>	<p>Yes</p>
	<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Thomas A Federer</b> <i>President</i></p> <p>10/30/2017</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#">KEFN - Antenna-Vendor Letter.pdf</a>	Applicant	General Information	Letter from Electronics Research, Inc. concerning ability to supply antenna
<a href="#">KEFN-CD Superior Broadcast -- Letter of Compliance.pdf</a>	Applicant	General Information	Letter from Superior Broadcast re Statement of Fitness
<a href="#">KEFN EXHIBIT SUPPORTING WAIVER 10-25-17 (002).pdf</a>	Applicant	Fees, Waivers and Exemptions	EXHIBIT SUPPORTING WAIVER OF PHASE ASSIGNMENT, TESTING PERIOD, AND PHASE COMPLETION DATE
<a href="#">KEFN - Install-vendor letter.pdf</a>	Applicant	General Information	Letter from Electronics Research, Inc. concerning ability to install antenna
<a href="#">KEFN Support T-Mobile Spectrum 10-25-17.pdf</a>	Applicant	All Purpose	Letter from T-Mobile