

# (REFERENCE COPY - Not for submission) Form 380 - Transfer/Assignment Request

File Number: 0000199115 Submit Date: 09/01/2022 Lead Call Sign: KMRG-LP Facility ID: 191832

FRN: 0032581456

Status: Granted Service: Low Power FM Purpose: Call Sign Request (Transfer/Assignment) Status Date: 01/09/2023 Filing Status: Inactive

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

Information

Applicant

#### Applicant Name, Type, and Contact Information

Applicant Address Phone Email **Applicant Type** TALK RADIO OF PAHRUMP INC PO Box 5303 +1 (775) 751talkradioofpahrump@gmail. NFP Doing Business As: TALK RADIO OF PAHRUMP, NV 2579 com PAHRUMP INC 89041 **United States** 

Contact Representatives (1)

| Contact Name                           | Address  | Phone                 | Email               | Contact Type                |
|--|--|-----------------------|---------------------|-----------------------------|
| Michelle Bradley , CBT<br>REC Networks | 11541 Riverton Wharf Rd<br>Mardela Springs, MD<br>21837<br>United States | +1 (202) 621-<br>2355 | lpfm@recnet.<br>com | Technical<br>Representative |

### **Call Sign** Request

| Section             | Question   | Response   |
|---------------------|--|------------|
| Transfer/Assignment | Requested Call Sign  | KMRG-LP    |
| Request             | License Assignment/Transfer of Control Application Number  | 0000199112 |
|                     | Effective Date   | 09/07/2022 |
|                     | The applicant submitting this request has obtained consent from the primary call sign holder to use the requested call sign. | 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).         |   |
|               |                                     | I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.   | <b>Geraldine Ahrens</b><br><i>President</i><br>09/01/2022 |

## Attachments

| File Name                                     | Uploaded By | Attachment Type                    | Description  | Upload Status                                   |
|---|-------------|------------------------------------|--|---|
| <u>1273017948170082_090122_082104.</u><br>pdf | Applicant   | Transfer<br>/Assignment<br>Request | Letter from US Coast<br>Guard releasing KMRG at<br>the request of Michelle<br>Bradley, CBT | Done with<br>Virus Scan<br>and/or<br>Conversion |