

(REFERENCE COPY - Not for submission) Request to Extend a Full Power FM Engineering STA Application

File Number:0000218510Submit Date:07/26/2023Lead Call Sign:KLBUFacility ID:31801

FRN: 0005035415

Service: Full Power FM Purpos

Purpose: STA Extension Status: Granted

Status Date: 08/16/2023 Filing S

Filing Status: Active

General Information	Section		Question			Respons	se		
	Attachments		Are attachments (other than associated schedules) being filed with this application?						
Fees, Waivers, and Exemptions	Section		Question				Response		
	Fees		Is the applicant exempt from FCC application Fees?				ees?	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)?				sion's rule	No	
			Total number of	f rule sectior	ns involved	in this wa	aiver request:		
	Application Type		Call Sign	Fac	ility ID	F	ee Code	Fee	Amount
	STA Extension					N	IVY	\$235	.00
						Т	otal		
Applicant Information	Applicant Name,	Type, and		formatior	ר Phone		Emoil		Applicant Turc
	Applicant		Address	_			Email		Applicant Type
	HUTTON BROADCASTING, LLC		2502 CAMINO ENTRADA SUITE C SANTA FE, NM 87507 United States				johnsneely@yahoo. LLC com		LLC
Contact	Contact Name	Address		Phopo		Email		Cor	stact Type
Representatives	Contact Name	Address		Phone		Email			tact Type
(1)	John Neely , Esq . ·	4 Simms Kensingto United St	on, MD 20895	+1 (301) 9	933-6304	johnsne	eely@yahoo.co	m Leg	al Representative

Extension Request	Section	Question	Response	
	Extension Request	Please enter the new requested expiration date:	02/16/2024	

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 declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	John Neely FCC Counsel 07/26/2023

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
KLBU STA extend (Aug2023).	Applicant	Extension	Extension	Done with Virus Scan and/or
docx		Request	Request	Conversion