

# (REFERENCE COPY - Not for submission)

# Transfers

| Lead File Number: BTCH-20081110ALP |                      | I I             |           |         | _ead Call Sign: <b>KEZJ-FM</b> |       |                |
|------------------------------------|----------------------|-----------------|-----------|---------|--------------------------------|-------|----------------|
| Service: Full Power FM             | Purpose: <b>Tran</b> | sfer of Control | Status: C | Franted | Status Date: 12/12             | /2008 | Filing Status: |
| Active                             |                      |                 |           |         |                                |       |                |

| General     | Section     | Question                                                                             | Response |
|-------------|-------------|--------------------------------------------------------------------------------------|----------|
| Information | 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?             | No       |
|         | Indicate reason for fee exemption:                             |          |
| Waivers | Does this filing request a waiver of the Commission's rule(s)? |          |
|         | Total number of rule sections involved in this waiver request: |          |

### Transfer Type

| Question                                                                                                                         | Response  |
|----------------------------------------------------------------------------------------------------------------------------------|-----------|
| Is this application a pro forma Transfer of Control?                                                                             | Yes       |
| By answering "Yes" the Applicant certifies that the use of short form pro forma application is appropriate for this transaction? | Yes       |
| Is the Transfer Voluntary or Involuntary:                                                                                        | Voluntary |

#### Authorizations to be Transferred

### Selected Call Signs

| Call Sign | Facility ID | File Number      | Service | City, State    |
|-----------|-------------|------------------|---------|----------------|
| KLIX      | 3404        | BTC-20081110ALQ  | AM      | TWIN FALLS, ID |
| KEZJ-FM   | 3403        | BTCH-20081110ALP | FM      | TWIN FALLS, ID |
| KLIX-FM   | 3407        | BTCH-20081110ALR | FM      | TWIN FALLS, ID |
| KSNQ      | 87843       | BTCH-20081110ALS | FM      | TWIN FALLS, ID |

| Transfer<br>Questions | Question                                                                                                                                                                                                                     | Response |
|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
|                       | Were any of the authorizations that are the subject of this application obtained through the Commission's competitive bidding procedures (see 47 C.F.R. Sections 1.2111(a) and 73.5000)?                                     |          |
|                       | Were any of the authorizations that are the subject of this application obtained through the Commission's point system for reserved channel noncommercial educational stations (see 47 C.F.R. Sections 73.7001 and 73.7003)? |          |
|                       | Have all such stations operated for at least 4 years with a minimum operating schedule since grant pursuant to the point system?                                                                                             |          |

| Were any of the authorizations that are the subject of this application obtained after award of a dispositive Section 307(b) preference using the Tribal Priority, through Threshold Qualifications procedures, or through the Tribal Priority as applied before the NCE fair distribution analysis set forth in 47 C.F.R. § 73.7002(b)?                                                                                    |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Have all such stations operated for at least 4 years with a minimum operating schedule since grant?                                                                                                                                                                                                                                                                                                                         |  |
| Do both the transferor and transferee qualify for the Tribal Priority in all respects?                                                                                                                                                                                                                                                                                                                                      |  |
| LPFM Licenses Only: Has it been at least 18 months since the initial construction permit for the LPFM station was granted?                                                                                                                                                                                                                                                                                                  |  |
| LPFM Licenses Only: Does the assignment of the LPFM authorization satisfy the consideration restrictions of 47 CFR Section 73.865(a)(1)?                                                                                                                                                                                                                                                                                    |  |
| LPFM Licenses Only: Were any of the LPFM authorizations that are subject to this application obtained through the Commission's point system for low power FM stations (see 47 CFR Section 73.872)?                                                                                                                                                                                                                          |  |
| If yes to question above, have all such LPFM stations operated for at least four years since grant pursuant to the point system?" (options – Y/N. If Yes, nothing further required. No requires attachment as follows)"If no to new sub question, list pertinent authorizations in an Exhibit and include in the Exhibit a showing that the transaction is consistent with the requirements of 47 CFR Section 73.865(a)(3). |  |

# Licensee/Permittee Name, Type, and Contact Information

| Licensee/Permittee                                                                                                      | Address                                                                         | Phone                 | Email FRN  |
|-------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-----------------------|------------|
| GAP BROADCASTING TWIN FALLS LICENSE, LLC<br>Applicant<br>Doing Business As: GAP BROADCASTING TWIN FALLS<br>LICENSE, LLC | 7150 EAST<br>CAMELBACK<br>SUITE 444<br>SCOTTSDALE, AZ<br>85251<br>United States | +1 (480) 344-<br>2965 | 0017029844 |

| Licensee<br>/Permittee<br>Contact<br>Representatives<br>(2) | Contact Name                                  | Address                                                                                                                    | Phone                | Email                       | Contact<br>Type |
|-------------------------------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------------------|-----------------|
|                                                             | HOWARD LIBERMAN<br>DRINKER BIDDLE & REATH LLP | 1500 K STREET, N.W.<br>SUITE 1100<br>WASHINGTON, DC 20005                                                                  | +1 (202)<br>842-8876 | HOWARD.<br>LIBERMAN@DBR.COM |                 |
|                                                             | OAKTREE FUND AIF SERIES, L.<br>P SERIES B     | C/O OAKTREE CAPITAL<br>MANAGEMENT, L.P.<br>333 SOUTH GRAND AVENUE,<br>28TH FLOOR<br>LOS ANGELES, CA 90071<br>United States | +1 (213)<br>830-6800 |                             |                 |

| Licensee<br>/Permittee Legal<br>Certifications | Section                                       | Question                                                                                                                                                                                                                                                                                                                                                                                                                    | Response |
|------------------------------------------------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
|                                                | Agreements for Transfer<br>Control of Station | Licensee/Permittee certifies that:<br>(i) it has placed its public inspection file(s) and submitted to<br>the Commission as an Exhibit to this application copies of all<br>agreements for the transfer of the station(s);<br>(ii) these documents embody the complete and final<br>understanding between Transferor and Transferee; and<br>(iii) these agreements comply fully with the Commission's<br>rules and policies |          |
|                                                | Other Authorizations                          | Please upload an attachment detailing the call signs,<br>locations, and facility identifiers of all other broadcast<br>stations in which Licensee/Permittee or any party to the<br>application has an attributable interest.                                                                                                                                                                                                |          |

### Licensee /Permittee Information

| Character Issues                     | Licensee/Permittee certifies that neither licensee/permittee<br>nor any party to the application has or has had any interest<br>in, or connection with:<br>(a) any broadcast application in any proceeding where<br>character issues were left unresolved or were resolved<br>adversely against the applicant or any party to the<br>application or<br>(b) any pending broadcast application in which character<br>issues have been raised                                                           |  |
|--------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Adverse Findings                     | Licensee/Permittee certifies that, with respect to the<br>Licensee/Permittee and each party to the application, no<br>adverse finding has been made, nor has an adverse final<br>action been taken by any court or administrative body in a<br>civil or criminal proceeding brought under the provisions of<br>any law related to any of the following: any felony; mass<br>media-related antitrust or unfair competition; fraudulent<br>statements to another governmental unit; or discrimination. |  |
| Local Public Notice                  | Licensee/Permittee certifies that it has or will comply with the public notice requirements of 47 C.F.R. Section 73.3580.                                                                                                                                                                                                                                                                                                                                                                            |  |
| Auction Authorization                | Licensee/Permittee certifies that more than five years have<br>passed since the issuance of the construction permit for the<br>station being assigned, where that permit was acquired in an<br>auction through the use of a bidding credit or other special<br>measure.                                                                                                                                                                                                                              |  |
| Anti-Discrimination<br>Certification | Licensee/Permittee certifies that neither licensee/permittee<br>nor any party to the application have violated the<br>Commission's prohibition against discrimination on the basis<br>of race, color, religion, national origin or sex in the sale of<br>commercially operated AM, FM, TV, Class A TV or<br>international broadcast stations.                                                                                                                                                        |  |

### Transferor Information

# Transferor Name, Type, and Contact Information

| Transferor                               | Туре  | Address             | Phone    | Email FRN  |
|------------------------------------------|-------|---------------------|----------|------------|
| OCM PRINCIPAL OPPORTUNITIES FUND IV AIF  | Other | C/O OAKTREE CAPITAL | +1 (213) | 0017029844 |
| (DELAWARE) GP, L.P.                      |       | MANAGEMENT, L.P.    | 830-     |            |
| Assignor                                 |       | 333 SOUTH GRAND     | 6800     |            |
| Doing Business As: OCM PRINCIPAL         |       | AVENUE, 28TH FLOOR  |          |            |
| OPPORTUNITIES FUND IV AIF (DELAWARE) GP, |       | LOS ANGELES, CA     |          |            |
| L.P.                                     |       | 90071               |          |            |

| Transferor<br>Contact              | Contact Name                                     | Address                                                    | Phone                 | Email                       | Contact<br>Type |
|------------------------------------|--------------------------------------------------|------------------------------------------------------------|-----------------------|-----------------------------|-----------------|
| Representatives<br>(1)             | HOWARD LIBERMAN<br>DRINKER BIDDLE & REATH<br>LLP | 1500 K STREET, NW<br>SUITE 1100<br>WASHINGTON, DC<br>20005 | +1 (202) 842-<br>8876 | HOWARD.LIBERMAN@DBR.<br>COM |                 |
| Transferor Legal<br>Certifications | Section                                          | Question                                                   |                       | Response                    |                 |

| Agreements for Transfer | Transferor certifies that:                                                                                                              | Yes |
|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-----|
| Control of Station      | <ul><li>(i) it has placed in Transferor's public inspection file(s) and<br/>submitted to the Commission as an Exhibit to this</li></ul> | 163 |
|                         | application copies of all agreements for the assignment /transfer of the station(s);                                                    |     |
|                         | (ii) these documents embody the complete and final                                                                                      |     |
|                         | understanding between Transferor and Transferee; and                                                                                    |     |
|                         | (iii) these agreements comply fully with the Commission's rules and policies                                                            |     |
|                         | If the transaction is involuntary, the Transferor certifies that                                                                        |     |
|                         | court orders or other authorizing documents have been issued and that it has placed in the licensee's/permittee's                       |     |
|                         | public inspection file(s) and submitted to the Commission                                                                               |     |
|                         | copies of such court orders or other authorizing documents.                                                                             |     |
| Character Issues        | Transferor certifies that neither transferor nor any party to                                                                           | Yes |
|                         | the application has or has had any interest in, or connection with:                                                                     |     |
|                         | (a) any broadcast application in any proceeding where                                                                                   |     |
|                         | character issues were left unresolved or were resolved                                                                                  |     |
|                         | adversely against the applicant or any party to the application or                                                                      |     |
|                         | (b) any pending broadcast application in which character                                                                                |     |
|                         | issues have been raised                                                                                                                 |     |
| Adverse Findings        | Transferor certifies that, with respect to the Transferor and                                                                           | Yes |
|                         | each party to the application, no adverse finding has been                                                                              |     |
|                         | made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding                  |     |
|                         | brought under the provisions of any law related to any of the                                                                           |     |
|                         | following: any felony; mass media-related antitrust or unfair                                                                           |     |
|                         | competition; fraudulent statements to another governmental                                                                              |     |
|                         | unit; or discrimination.                                                                                                                |     |
| Local Public Notice     | Transferor certifies that it has or will comply with the public notice requirements of 47 C.F.R. Section 73.3580.                       |     |
| Auction Authorization   | Transferor certifies that more than five years have passed                                                                              |     |
|                         | since the issuance of the construction permit for the station                                                                           |     |
|                         | being assigned, where that permit was acquired in an                                                                                    |     |
|                         | auction through the use of a bidding credit or other special measure.                                                                   |     |
| Anti-Discrimination     | Transferor certifies that neither licensee/permittee nor any                                                                            |     |
| Certification           | party to the application have violated the Commission's                                                                                 |     |
|                         | prohibition against discrimination on the basis of race, color, religion, national origin or sex in the sale of commercially            |     |
|                         | operated AM, FM, TV, Class A TV or international broadcast                                                                              |     |
|                         | stations.                                                                                                                               |     |

### Transferee Information

# Transferee Name, Type, and Contact Information

| Transferee                                                                                                          | Туре  | Address                                                                                                   | Phone                | Email FRN  |
|---------------------------------------------------------------------------------------------------------------------|-------|-----------------------------------------------------------------------------------------------------------|----------------------|------------|
| OAKTREE FUND AIF SERIES, L.P<br>SERIES B<br>Assignee<br>Doing Business As: OAKTREE FUND AIF<br>SERIES, L.P SERIES B | Other | C/O OAKTREE CAPITAL<br>MANAGEMENT, L.P.<br>333 SOUTH GRAND<br>AVENUE, 28TH FLOOR<br>LOS ANGELES, CA 90071 | +1 (213)<br>830-6800 | 0018482703 |

Transferee Contact Contact NameAddressPhoneEmailType

| Representatives<br>(1)             | HOWARD LIB<br>DRINKER BID<br>LLP | <b>ERMAN</b><br>DLE & REATH | 1500 K ST<br>SUITE 110<br>WASHING<br>20005                                                                                 |                                                                              | +1 (<br>887                                         | (202) 842-<br>6                                  | HOWARD.I<br>COM                                                                                 | .IBERMAN@DBR.       |          |
|------------------------------------|----------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|-----------------------------------------------------|--------------------------------------------------|-------------------------------------------------------------------------------------------------|---------------------|----------|
| Changes in                         | Party Name                       | Citizenship                 | Address                                                                                                                    | Phone                                                                        | Email                                               | Interest Be                                      | efore Transfer                                                                                  | Interest After      | Fransfer |
| Interest (0)                       |                                  |                             |                                                                                                                            |                                                                              | Emp                                                 | oty                                              |                                                                                                 |                     |          |
| Changes in<br>Interest             | Question                         |                             |                                                                                                                            |                                                                              |                                                     |                                                  |                                                                                                 |                     | Response |
| Certification                      | Applicant certil                 | fies that equity a          | nd financial ir                                                                                                            | nterests not                                                                 | set forth                                           | by the trans                                     | feree are nona                                                                                  | ttributable.        | Yes      |
| Parties to the                     | Party Name                       | Citizen                     | ship                                                                                                                       | Address                                                                      |                                                     | Phone                                            | Email                                                                                           | Positional Interest |          |
| Application (0)                    |                                  |                             |                                                                                                                            |                                                                              | Emp                                                 | oty                                              |                                                                                                 |                     |          |
| Parties to the<br>Application      | Question                         |                             |                                                                                                                            |                                                                              |                                                     |                                                  |                                                                                                 |                     | Response |
| Certification                      | Applicant certil                 | ies that equity a           | nd financial ir                                                                                                            | nterests not                                                                 | set forth                                           | by the trans                                     | feree are nona                                                                                  | ttributable.        |          |
| Transferee Legal<br>Certifications | Section                          |                             | Question                                                                                                                   |                                                                              |                                                     |                                                  |                                                                                                 | Response            |          |
| Certifications                     | Agreements f                     | or Sale                     | inspection f<br>complete ar<br>station(s); a                                                                               | en agreeme<br>ile and subr<br>nd final agre<br>ind<br>greements c            | ents in the<br>nitted to<br>eement fo               | or the sale or                                   | 's public<br>sion embody th<br>r transfer of the<br>Commission's                                |                     |          |
|                                    | Other Authori                    | zations                     | locations, a                                                                                                               | nd facility id<br>vhich Trans                                                | entifiers<br>feree or                               | etailing the c<br>of all other b<br>any party to | -                                                                                               |                     |          |
|                                    | Multiple Owne                    | ership                      | an attributal<br>radio or tele<br>(s) subject t                                                                            | ble radio join<br>evision time<br>to this applic                             | nt sales<br>brokeraç<br>cation or                   | agreement o<br>ge agreemen<br>with any oth       | tion the holder<br>r an attributable<br>at with the static<br>er station in the<br>application? | e<br>n              |          |
|                                    |                                  |                             |                                                                                                                            |                                                                              | •                                                   | posed assigr<br>ownership ru                     | nment complies<br>Iles.                                                                         |                     |          |
|                                    |                                  |                             | <ul> <li>(1) does no<br/>policies rela<br/>members;</li> <li>(2) complies<br/>ownership i</li> <li>(3) complies</li> </ul> | t present an<br>ating to med<br>s with the C<br>nterests; an<br>s with the C | issue un<br>ia interes<br>ommissio<br>d<br>ommissio | on's restrictio                                  | nmission's                                                                                      | e                   |          |

and creditors.

|                                  | Does the Transferee claim status as an "eligible entity," that<br>is, an entity that qualifies as a small business under the<br>Small Business Administration's size standards for its<br>industry grouping (as set forth in 13 C.F.R. § 121-201), and<br>holds<br>(1) 30 percent or more of the stock or partnership interests<br>and more than 50 percent of the voting power of the<br>corporation or partnership that will own the media outlet; or<br>(2) 15 percent or more of the stock or partnership interests<br>and more than 50 percent of the voting power of the<br>corporation or partnership that will own the media outlet,<br>provided that no other person or entity owns or controls<br>more than 25 percent of the outstanding stock or partnership<br>interests; or<br>(3) More than 50 percent of the voting power of the<br>corporation that will own the media outlet (if such<br>corporation is a publicly traded company)? |     |
|----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                                  | Does this transfer include a grandfathered cluster of stations?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |
|                                  | Applicant certifies that it will come in compliance by<br>divesting the necessary station(s) within 12 months of the<br>consummation of this transaction to:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |     |
|                                  | A) An Eligible Entity (as defined in Item 6d, above).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |
|                                  | B) An Irrevocable Trust that will assign the station(s) to an Eligible Entity.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |     |
| Acquisition of Control           | Please upload an attachment listing the file number and date<br>of grant of FCC Form 301, 314, or 315 application by which<br>the Commission approved the qualifications of the individual<br>or entity with a pre-existing interest in the licensee/permittee<br>that is now acquiring control of the licensee/permittee as a<br>result of the grant of this application.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | N/A |
| Character Issues                 | <ul> <li>Transferee certifies that neither transferee nor any party to the application has or has had any interest in, or connection with:</li> <li>(a) any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or any party to the application; or</li> <li>(b) any pending broadcast application in which character issues have been raised.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Yes |
| Adverse Findings                 | Transferee certifies that, with respect to the transferee and<br>each party to the application, no adverse finding has been<br>made, nor has an adverse final action been taken by any<br>court or administrative body in a civil or criminal proceeding<br>brought under the provisions of any law related to any of the<br>following: any felony; mass media-related antitrust or unfair<br>competition; fraudulent statements to another governmental<br>unit; or discrimination.                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Yes |
| Financial Qualifications         | Transferee certifies that sufficient net liquid assets are on<br>hand or are available from committed sources to<br>consummate the transaction and operate the station(s) for<br>three months.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |     |
| Program Service<br>Certification | Transferee certifies that it is cognizant of and will comply<br>with its obligations as a Commission licensee to present a<br>program service responsive to the issues of public concern<br>facing the station's community of license and service area.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |     |

| Auction Authorization                 | Transferee certifies that where less than five years have<br>passed since the issuance of the construction permit and the<br>permit had been acquired in an auction through the use of a<br>bidding credit or other special measure, it would qualify for<br>such credit or other special measure. |  |
|---------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Equal Employment<br>Opportunity (EEO) | If the applicant proposes to employ five or more full-time<br>employees, applicant certifies that it is filing simultaneously<br>with this application a Model EEO Program Report on FCC<br>Form 396-A.                                                                                            |  |

Response

### Tranferee Alien Ownership

Question

| Licensee                    | Section                             | Question                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Response |
|-----------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| /Permittee<br>Certification | General Certification<br>Statements | Licensee/Permittee certifies that it has answered each<br>question in this application based on its review of the<br>application instructions and worksheets. Licensee/Permittee<br>further certifies that where it has made an affirmative<br>certification below, this certification constitutes its<br>representation that the application satisfies each of the<br>pertinent standards and criteria set forth in the application<br>instructions and worksheets. |          |

|                          | The Licensee/Permittee certifies that neither the Licensee<br>/Permittee nor any other party to the application is subject to<br>a denial of Federal benefits pursuant to §5301 of the Anti-<br>Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a<br>conviction for possession or distribution of a controlled<br>substance. This certification does not apply to applications<br>filed in services exempted under §1.2002(c) of the rules, 47<br>CFR . See §1.2002(b) of the rules, 47 CFR § 1.2002(b), for<br>the definition of "party to the application" as used in this<br>certification § 1.2002(c). The Licensee/Permittee certifies<br>that all statements made in this application and in the<br>exhibits, attachments, or documents incorporated by<br>reference are material, are part of this application, and are<br>true, complete, correct, and 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 AND<br>/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR<br>REVOCATION OF ANY STATION AUTHORIZATION (U.S.<br>Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S.<br>Code, Title 47, §503).                                     |  |
|                          | I certify that this application includes all required and relevant attachments.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
|                          | I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |

| Transferee    | Section                             | Question                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Response |
|---------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| Certification | General Certification<br>Statements | The Transferee certifies that neither the Transferee nor any<br>other party to the application is subject to a denial of Federal<br>benefits pursuant to §5301 of the Anti-Drug Abuse Act of<br>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 of<br>"party to the application" as used in this certification § 1.2002<br>(c). The Transferee certifies that all statements made in this<br>application and in the exhibits, attachments, or documents<br>incorporated by reference are material, are part of this<br>application, and are true, complete, correct, and made in<br>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 certify that this application includes all required and    |                 |
|                          | relevant attachments.                                        |                 |
|                          | I declare, under penalty of perjury, that I am an authorized | TODD MOLZ       |
|                          | representative of the above-named applicant for the          | SECRETARY OF    |
|                          | Authorization(s) specified above.                            | GENERAL PARTNER |
|                          |                                                              | 11/10/2008      |

| Transferor    |
|---------------|
| Certification |

| Section                             | Question                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Response |
|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| General Certification<br>Statements | The Transferor certifies that neither the Transferor nor any<br>other party to the application is subject to a denial of Federal<br>benefits pursuant to §5301 of the Anti-Drug Abuse Act of<br>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 of<br>"party to the application" as used in this certification § 1.2002<br>(c). The Transferor certifies that all statements made in this<br>application and in the exhibits, attachments, or documents<br>incorporated by reference are material, are part of this<br>application, and are true, complete, correct, and made in<br>good faith.                                            |          |
| Authorized Party to Sign            | <ul> <li>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN<br/>DISMISSAL OF THE APPLICATION AND FORFEITURE<br/>OF ANY FEES PAID</li> <li>Upon grant of this application, the Authorization Holder may<br/>be subject to certain construction or coverage requirements.</li> <li>Failure to meet the construction or coverage requirements<br/>will result in automatic cancellation of the Authorization.</li> <li>Consult appropriate FCC regulations to determine the<br/>construction or coverage requirements that apply to the type<br/>of Authorization requested in this application.</li> <li>WILLFUL FALSE STATEMENTS MADE ON THIS FORM<br/>OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND<br/>/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR<br/>REVOCATION OF ANY STATION AUTHORIZATION (U.S.<br/>Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S.<br/>Code, Title 47, §503).</li> </ul> |          |
|                                     | I certify that this application includes all required and relevant attachments.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |          |

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

#### **TODD MOLZ** VICE PRESIDENT AND SECRETARY OF THE GP OF THE GP

11/10/2008

#### Attachments

| File Name                            | Uploaded<br>By | Attachment<br>Type | Description               | Upload Status                             |
|--------------------------------------|----------------|--------------------|---------------------------|-------------------------------------------|
| <u>1275322_4991409.</u><br>pdf       | Applicant      | All Purpose        | Other Authorizations      | Done with Virus Scan and/or<br>Conversion |
| <u>1275322_5019932.</u><br>pdf       | Applicant      | All Purpose        | Control Structure         | Done with Virus Scan and/or Conversion    |
| <u>1275322_700943.</u><br><u>txt</u> | Applicant      | All Purpose        | AGREEMENT FOR<br>TRANSFER | Done with Virus Scan and/or<br>Conversion |
| <u>1275322_700944.</u><br><u>txt</u> | Applicant      | All Purpose        | AGREEMENT FOR<br>TRANSFER | Done with Virus Scan and/or<br>Conversion |
| <u>1275322_700945.</u><br><u>txt</u> | Applicant      | All Purpose        | CHANGES IN INTEREST       | Done with Virus Scan and/or<br>Conversion |