

(REFERENCE COPY - Not for submission) Request to Extend a Silent Authority of an FM Translator Station Application

File Number: BLESTA-20160926ABP | Submit Date: 09/26/2016 | Lead Call Sign: K226BF | Facility ID: 152431

FRN: 0002711737

Service: FM Translator | Purpose: STA Extension | Status: Granted | Status Date: 10/21/2016 | Filing Status: Active

General Information

| Section | Question | Response |
|-------------|--|----------|
| Attachments | Are attachments (other than associated schedules) being filed with this application? | |

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|--|--|-----------------------|-------|----------------|
| MIDWEST COMMUNICATIONS, INC. Applicant Doing Business As: MIDWEST COMMUNICATIONS, INC. | ATTN: PAUL RAHMLOW 904 GRAND AVE. WAUSAU, WI 54403 United States | +1 (000) 000- 0000 | | ОТН |

Contact Representatives (1)

| Contact Name | Address | Phone | Email | Contact Type |
|---|--|-----------------------|--------------------------|-------------------------|
| JOHN S. NEELY, ESQ. MILLER AND NEELY, P.C. | SUITE 203 3750 UNIVERSITY BLVD., WEST KENSINGTON, MD 20895 United States | +1 (301) 933- 6304 | JOHNSNEELY@YAHOO. COM | Legal Representative |

Extension Request

| Section | Question | Response |
|-------------------|---|-----------|
| Extension Request | Reason for going silent: | Technical |
| | Please enter the new requested expiration date: | |

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.). | |

| otll Fe Ac po ce ex 20 of 1.2 in do | the Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of orderal benefits pursuant to §5301 of the Anti-Drug Abuse of of 1988, 21 U.S.C. § 862, because of a conviction for assession or distribution of a controlled substance. This ortification does not apply to applications filed in services the empted under §1.2002(c) of the rules, 47 CFR. See §1. 1002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification § 12002(c). The Applicant certifies that all statements made this application and in the exhibits, attachments, or accuments incorporated by reference are material, are part this application, and are true, complete, correct, and ade in good faith. | |
|---|---|--|
| E1 | AILURE TO SIGN THIS APPLICATION MAY RESULT IN | |
| DI OI Up be Fa wi Co of W OI AN | SMISSAL OF THE APPLICATION AND FORFEITURE F ANY FEES PAID On grant of this application, the Authorization Holder may a subject to certain construction or coverage requirements. It result in automatic cancellation of the Authorization. Onsult appropriate FCC regulations to determine the instruction or coverage requirements that apply to the type Authorization requested in this application. ILLFUL FALSE STATEMENTS MADE ON THIS FORM R ANY ATTACHMENTS ARE PUNISHABLE BY FINE ND/OR IMPRISONMENT (U.S. Code, Title 18, §1001) ND/OR REVOCATION OF ANY STATION | |
| DII Upp bee Factorial Coco of WW OPP AN | con grant of this application, the Authorization Holder may esubject to certain construction or coverage requirements. Authorization when the construction or coverage requirements are result in automatic cancellation of the Authorization. It is appropriate FCC regulations to determine the enstruction or coverage requirements that apply to the type Authorization requested in this application. ILLIFUL FALSE STATEMENTS MADE ON THIS FORM RANY ATTACHMENTS ARE PUNISHABLE BY FINE ND/OR IMPRISONMENT (U.S. Code, Title 18, §1001) | |

JOHN NEELY

Attachments

Authorized Party to Sign

| File Name | Uploaded By | Attachment Type | Description | Upload Status |
|---|-------------|-----------------|--------------------|---|
| 1740028 1418935.txt | Applicant | All Purpose | DISCUSSION | Done with Virus Scan and/or Conversion |
| D:\data\prod\cdbs\letters\\68\A-1740028_F- 152431_L-68459-BLESTA-20160926ABP.pdf | Internal | All Purpose | imported letter | Done with Virus Scan and/or Conversion |

/OR FORFEITURE (U.S. Code, Title 47, §503).

Authorization(s) specified above.

I declare, under penalty of perjury, that I am an authorized

representative of the above-named applicant for the