

# Renewal of License File Number: 0000196290 Submit Date: 07/29/2022 Call Sign: KQSL-LD Facility ID: 130569 FRN: 0014185748 State: California City: SAN RAFAEL Service: LPD Purpose: Renewal of License Status: Granted Status Date: 11/30/2022 Expiration Date: 12/01/2030 Filing Status: Active

| General<br>Information           | Section            | Question   |            | Response   |  |
|----------------------------------|--------------------|--|------------|------------|--|
|                                  | Attachments        | Are attachments (other than associated schedules) being filed with this application? |            | ng No      |  |
|                                  |                    |  |            |            |  |
| Fees, Waivers,<br>and Exemptions | Section            | Question   |            | Response   |  |
|                                  | Fees               | Is the applicant exempt from FCC application Fees?                                   |            | No         |  |
|                                  |                    | Indicate reason for fee exemption:   |            |            |  |
|                                  |                    | Is the applicant exempt from FCC regulatory Fees?                                    |            | Yes        |  |
|                                  | Waivers            | Does this filing request   | ıle(s)? No |            |  |
|                                  |                    | Total number of rule see   | quest:     |            |  |
|                                  |                    |  |            |            |  |
|                                  | Application Type   |  | Fee Code   | Fee Amount |  |
|                                  | Renewal of License |  | MAL        | \$145.00   |  |
|                                  |                    |  | Total      | \$145.00   |  |

# Applicant Name, Type, and Contact Information

## Applicant Information

| Applicant  | Address  | Phone             | Email            | Applicant Type |
|--|--|-------------------|------------------|----------------|
| <b>One Ministries, Inc.</b><br>Doing Business As: Summit | Keith Leitch<br>PO Box 1118<br>Santa Rosa, CA 95402<br>United States | +1 (707) 479-9428 | kqsltv@gmail.com | Not-for-Profit |

| Contact<br>Representatives<br>(2) | Contact Name  | Address  | Phone                 | Email                    | Contact Type                |
|-----------------------------------|---|--|-----------------------|--------------------------|-----------------------------|
|                                   | <b>Keith Leitch</b><br><i>President</i><br>One Ministries, Inc.             | Keith Leitch<br>PO Box 1118<br>Santa Rosa, CA<br>95402<br>United States    | +1 (707) 526-<br>2765 | keith@leitch.tv          | Technical<br>Representative |
|                                   | <b>James Oyster</b><br><i>Attorney</i><br>Law Offices of James L.<br>Oyster | James L. Oyster<br>108 Oyster Lane<br>Castleton, VA 22716<br>United States | +1 (540) 937-<br>4800 | joysterlaw@gmail.<br>com | Legal Representative        |

|  | Section   | Question  | Response |
|--|---|---|----------|
|  | Character Issues                                      | Licensee certifies that neither the licensee nor any party to<br>the application has or has had any interest in, or connection<br>with, 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;   | Yes      |
|  |   | Licensee certifies that neither the licensee nor any party to<br>the application has or has had any interest in, or connection<br>with, any pending broadcast application in which character<br>issues have been raised   | Yes      |
|  | Adverse Findings                                      | Licensee certifies that, with respect to the licensee and each<br>party to the application, no adverse finding has been made,<br>nor has an adverse final action been taken by any court or<br>administrative body in a civil or criminal proceeding brought<br>under the provisions of any laws 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      |
|  | FCC Violations during the<br>Preceding License Term   | Licensee certifies that, with respect to the station(s) for<br>which renewal is requested, there have been no violations<br>by the licensee of the Communications Act of 1934, as<br>amended, or the rules or regulations of the Commission<br>during the preceding license term. If "No", the licensee must<br>submit an explanatory exhibit providing complete<br>descriptions of all violations.   | Yes      |
|  | Ownership   | The licensee certifies that, with respect to the station(s) for which renewal is requested, it complied with 47 CFR Section 73.3555.  | Yes      |
|  | Alien Ownership and<br>Control                        | Licensee certifies that it complies with the provisions of<br>Section 310 of the Communications Act of 1934, as<br>amended, relating to interests of aliens and foreign<br>governments.   | Yes      |
|  | Non-Discriminatory<br>Advertising Sales<br>Agreements | Commercial licensee certifies that its advertising sales<br>agreements do not discriminate on the basis of race or<br>ethnicity and that all such agreements held by the licensee<br>contain non-discrimination clauses. Noncommercial<br>licensees should select "not applicable."   | Yes      |

| Other BroadCast | Section                           | Question   | Response |
|-----------------|-----------------------------------|--|----------|
| Certifications  | Other BroadCast<br>Certifications | Does this application include one or more FM translator<br>station(s) or TV translator station(s) or LPTV station(s), in<br>addition to the station listed at the top of this section? | No       |

## TV Translator/ LPTV Certifications (1)

#### Section Question Response **Operational Status** Silent Stations Licensee certifies the station is currently on the air Yes broadcasting programming intended to be received by the public. **Rebroadcast Status** Licensee certifies that the station is currently rebroadcasting Yes the signal of a full power TV, Class A TV, or LPTV station. **Rebroadcast Station(s):** Call Service Sign **Facility Id** code city State KQSL 8378 **Rebroadcast Consent** Licensee certifies that it has obtained written authority from Yes the licensee of the primary station identified above for retransmitting the primary station's programming **EEO Program Report** Licensee certifies that it has filed with the Commission the Yes station's Broadcast EEO Program Report (Form 2100, File Number: 0000196215 Schedule 396), and has posted the most recent Public File Report on the station's website (if it has one), as required by 47 CFR Sections 73.2080(f)(1) and 73.2080(c)(6). **Environmental Effects** Licensee certifies that the specified facility complies with the Yes maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments. **Biennial Ownership Report** Licensee certifies that the station's Biennial Ownership Yes Report (Form 2100, Schedules 323 or 323-E) has been filed with the Commission, as required by 47 CFR Section 74.797. **Discontinued Operations** Licensee certifies that during the preceding license term the Yes station has not been silent for any consecutive 12-month period. Adherence to Minimum Licensee certifies that during the preceding license term the Yes **Operating Schedules** station has not been silent (or operating for less than its prescribed minimum operating hours) for any period of more than 30 days. Adherence to Operating Licensee certifies that during the preceding license term the Yes **Parameters** station has operated pursuant to its authorized operating parameters, either pursuant to the terms of its license, special temporary authority, or as otherwise permitted under the Commission's rules.

#### Call Sign: KQSL-LD

| Certification | Section                             | Question  | Response                                  |
|---------------|-------------------------------------|---|---|
|               | General Certification<br>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<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 Applicant 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.   | Yes                                       |
|               |                                     | I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.  | Keith J Leitch<br>President<br>07/29/2022 |

Information not provided.

### Attachments