

## Request for Silent Authority of a LPTV Station Application

File Number: 0000172169		Submit Date: 11/29/2021	Call Sign: KDNU-LD		Facility ID: 67876	FRN: 0032881088	
State: Nevada City: LAS VEGAS							
Service: LPD	Purpose: F	Request for Silence STA	Status: Granted	Statu	us Date: <b>12/01/2021</b>	Expiration Date:	
05/13/2022	Filing Status	InActive					

General Information	Section	Question			Response
Applicant Information		, Type, and Contact Info	Emeil		
	Applicant	Address	Phone	Email	Applicant Type
	Craig A Ruark	Craig Ruark	+1 (702) 493-	craig.ruark@gmail.	Limited Liability
	LLC	1950 Towering Pines	7974	com	Company
		Street			
		Las Vegas, NV 89135			
		United States			

## **Authorization Holder Name**

Check box if the Authorization Holder name is being updated because of the sale (or transfer of control) of the Authorization(s) to another party and for which proper Commission approval has not been received or proper notification provided.

Contact Representatives (3)	Contact Name	Address	Phone	Email	Contact Type
	<b>Dan J Alpert</b> <i>Legal Counsel</i> THE LAW OFFICE OF DAN J. ALPERT	2120 21st Rd. N Arlington, VA 22201 United States	+1 (703) 243- 8690	DJA@COMMLAW. TV	Legal Representative
	<b>Darryl K DeLawder</b> <i>President</i> DeLawder Communications, Inc.	P.O. Box 1095 Ashburn, VA 20146 United States	+1 (703) 299- 9222	delawder@aol. com	Technical Representative
	<b>Craig Ruark</b> <i>Managing Member</i> Craig Ruark, LLC	1950 Towering Pines Street Las Vegas, NV 89135 United States	+1 (702) 493- 7974	craig.ruark@gmail. com	Managing Member

Station Status	Question	Response	
	Date Station Went Silent:	11/13/2021	

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	<ul> <li>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</li> <li>Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements.</li> <li>Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization.</li> <li>Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application.</li> <li>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).</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.	<b>Craig Ruark</b> <i>Managing Member</i> 11/29/2021

Attachments	File Name	Uploaded By	Attachment Type	Description
	STA Justification.pdf	Applicant	General Information	