



(REFERENCE COPY - Not for submission)

Annual DTV Ancillary/Supplementary Services Report

File Number: 0000006310 | Submit Date: 11/23/2015 | Call Sign: K15CD-D | Facility ID: 40786 | FRN: 0005095062 | State: Utah | City: MAYFIELD

Service: LPT | Purpose: Annual Ancillary/Supplemental Service Report | Status: Received | Status Date: 11/23/2015 | Filing Status: Active

General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
SANPETE COUNTY Applicant Doing Business As: SANPETE COUNTY	Claudia Jarrett COURTHOUSE BUILDING SANPETE COUNTY CLERK MANTI, UT 84642 United States	+1 (435) 851-1540	cjarrett02@gmail.com	Other

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
(2)

Contact Name	Address	Phone	Email	Contact Type
Claudia Jarrett <i>Sanpete County</i> <i>Commissioner</i> Sanpete County	Claudia 160 North Main Street Manti, UT 84642 United States	+1 (435) 527- 3566	cjarrett02@gmail.com	Legal Representative
Mauri Kent Parsons <i>Sanpete County Technical</i> <i>Adviser</i> MP Electronics	371 SOUTH 460 EAST P.O. BOX 473 MONROE, UT 84754 United States	+1 (435) 527- 3508	MAURIPARSONS@HOTMAIL. COM	Technical Representative

**Ancillary
/Supplementary
Services**

Call Sign	City	State	Licensee
K50HL-D	MOUNT PLEASANT	UT	SANPETE COUNTY
K24HJ-D	MANTI, ETC.	UT	SANPETE COUNTY
K26IH-D	MANTI, ETC.	UT	SANPETE COUNTY
K32JB-D	FOUNTAIN GREEN	UT	SANPETE COUNTY
K15HG-D	MOUNT PLEASANT	UT	SANPETE COUNTY
K17JD-D	MOUNT PLEASANT	UT	SANPETE COUNTY
K31FN-D	MANTI & EPHRAIM	UT	SANPETE COUNTY
K28JN-D	MANTI, ETC.	UT	SANPETE COUNTY
K46HO-D	MOUNT PLEASANT	UT	SANPETE COUNTY
K25GS-D	MANTI AND EPHRAIM	UT	SANPETE COUNTY
K38MV-D	FOUNTAIN GREEN	UT	SANPETE COUNTY
K18IU-D	MAYFIELD	UT	SANPETE COUNTY
K39KH-D	FOUNTAIN GREEN	UT	SANPETE COUNTY
K30KK-D	FOUNTAIN GREEN	UT	SANPETE COUNTY
K39KG-D	MAYFIELD	UT	SANPETE COUNTY
K16IB-D	MOUNT PLEASANT	UT	SANPETE COUNTY
K18IV-D	MOUNT PLEASANT	UT	SANPETE COUNTY
K30KJ-D	MANTI & EPHRAIN	UT	SANPETE COUNTY
K22IX-D	MAYFIELD	UT	SANPETE COUNTY
K40KO-D	FOUNTAIN GREEN	UT	SANPETE COUNTY
K35JK-D	FOUNTAIN GREEN	UT	SANPETE COUNTY
K41LI-D	MAYFIELD	UT	SANPETE COUNTY
K40KN-D	MAYFIELD	UT	SANPETE COUNTY
K19GN-D	MOUNT PLEASANT	UT	SANPETE COUNTY
K16HV-D	MAYFIELD	UT	SANPETE COUNTY
K41LE-D	FOUNTAIN GREEN	UT	SANPETE COUNTY
K22FW-D	MOUNT PLEASANT	UT	SANPETE COUNTY
K21IC-D	MOUNT PLEASANT	UT	SANPETE COUNTY
K34KQ-D	FOUNTAIN GREEN	UT	SANPETE COUNTY
K29EM-D	MANTI & EPHRAIM	UT	SANPETE COUNTY
K17JE-D	MAYFIELD	UT	SANPETE COUNTY
K46KT-D	MAYFIELD	UT	SANPETE COUNTY
K36MI-D	FOUNTAIN GREEN	UT	SANPETE COUNTY
K48IL-D	MOUNT PLEASANT	UT	SANPETE COUNTY

K42IY-D	FOUNTAIN GREEN	UT	SANPETE COUNTY
K38LH-D	MAYFIELD	UT	SANPETE COUNTY

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 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.	Mauri Kent Parsons <i>Sanpewte County Technical Adviser</i> 11/23/2015

Attachments

Information not provided.