

PROOF OF PUBLICATION

STATE OF IOWA
WAPELLO COUNTY

I, Wanda Moeller, being duly sworn on my oath, say I am the Publisher of the Ottumwa Courier, a newspaper printed in said Wapello County, Iowa and of general circulation there in, and that the advertisement Public Notice On April 26th, 2017

Ottumwa Radio hereto attached was published in said newspaper for 1 consecutive weeks to-wit:

05/09/2017

Wanda Moeller

Subscribed and sworn to before me, and in my presence, by the said

9th day of May, 2017



Traci Counterman

Notary Public

In and for Wapello County

Printer's fee \$7.43

COPY OF ADVERTISEMENT

Public Notice
On April 26th, 2017, O-Town Communications, Inc., filed an application with the Federal Communications Commission seeking consent to transfer control of the broadcast license of FM translator stations K274CV and K299BA Bruce Linder to Greg List. K274CV is licensed to serve Ottumwa, IA on frequency 107.7 from a transmitter site located at Blackhawk Rd., Marker 16825, Ottumwa, IA. K299BA is licensed to serve Ottumwa, IA on frequency 102.7 from a transmitter site located at Blackhawk Rd., Marker 16133, Ottumwa, IA.

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Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0031 (June 2014)	FOR FCC USE ONLY
FCC 315		
APPLICATION FOR CONSENT TO TRANSFER CONTROL OF ENTITY HOLDING BROADCAST STATION CONSTRUCTION PERMIT OR LICENSE		FOR COMMISSION USE ONLY FILE NO. -
Read INSTRUCTIONS Before Filling Out Form		

Section I - General Information

1.	Legal Name of the Licensee/Permittee O-TOWN COMMUNICATIONS, INC. Mailing Address 416 E. MAIN City OTTUMWA Telephone Number (include area code) 6416845563 FCC Registration Number: Call Sign KRKN	State or Country (if foreign address) IA E-Mail Address (if available) Facility ID Number 58762	
2.	Contact Representative (if other than licensee/permittee) JOHN NEELY, ESQ. Mailing Address SUITE 203 3750 UNIVERSITY BLVD., WEST City KENSINGTON Telephone Number (include area code) 3019336304 E-Mail Address (if available) JOHNSNEELY@YAHOO.COM	Firm or Company Name MILLER AND NEELY, P.C. ZIP Code 20895 -	
3.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input checked="" type="radio"/> Governmental Entity <input type="radio"/> Noncommercial Educational Licensee/Permittee <input type="radio"/> Other <input type="radio"/> N/A (Fee Required)		
4.	Purpose of Application: <input checked="" type="radio"/> Transfer of control of licensee <input type="radio"/> Transfer of control of permitte <input type="radio"/> Amendment to pending application File number of pending application: - If an amendment, submit as an Exhibit a listing by Section and Question Number of the portions of the pending application that are being revised. [Exhibit 1]		
5.	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 73.5001)? If yes, list pertinent authorizations in an Exhibit.		<input type="radio"/> Yes <input checked="" type="radio"/> No [Exhibit 2]
6.	a. 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)? b. If yes to 6(a), have all such stations operated for at least 4 years with a minimum operating schedule since grant pursuant to the point system? If no, list pertinent authorizations in an Exhibit and include in the Exhibit a showing that the transaction is consistent with the holding period requirements of 47 C.F.R. Section 73.7005(a). c. LPFM Licenses Only: Has the licensor held the station license and operated the station for at least three years?		<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Yes <input checked="" type="radio"/> No [Exhibit 3]

		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
7.	a. 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)?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	b. If yes to 7(a), have all such stations operated for at least 4 years with a minimum operating schedule since grant?	<input type="radio"/> Yes <input type="radio"/> No
	c. If no to 7(b), do both the assignor/transferor and assignee/transferee qualify for the Tribal Priority in all respects?	<input type="radio"/> Yes <input type="radio"/> No
If no, list pertinent authorizations in an Exhibit and include in the Exhibit a showing that the transaction is consistent with the established Tribal Priority holding period restrictions, or that the policy should be waived.		[Exhibit 4]

Section II - Transferor(s)

1.	Certification. Transferor(s) certify that it (they) have answered each question in this application based on its (their) review of the application instructions and worksheets. Transferor(s) further certify that where it (they) have made an affirmative certification below, this certification constitutes its (their) representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.	<input type="radio"/> Yes <input type="radio"/> No
2.	Legal Name of the Transferor BRUCE H LINDER Mailing Address 4608 BRUCE AVE. City EDINA State or Country (if foreign address) MN Zip Code 55424 - Telephone Number (include area code) 0000000000 E-Mail Address (if available)	
3.	Contact Representative (if other than transferor) Mailing Address City State or Country (if foreign address) Zip Code Telephone Number (include area code) E-Mail Address (if available)	Firm or Company Name
If more than one transferor, submit the information requested in questions 2 and 3 for each transferor.		[Exhibit 5]

4.	Changes in interests as a result of transfer. [Enter Changes in Interests Information]	
Changes in Interests as a Result of Transfer		
		INTEREST HELD
(A) NAMES AND ADDRESSES OF ANY PARTY TO APPLICATION HOLDING AN ATTRIBUTABLE INTEREST	(B) CITIZENSHIP	(C) BEFORE TRANSFER OR ASSIGNMENT (D) AFTER TRANSFER OR ASSIGNMENT
		(1) Percentage Votes (2) Percentage Total Assets (Equity plus Debt) (1) Percentage Votes (2) Percentage Total Assets (Equity plus Debt)
BRUCE H LINDER, EDINA, MN	US	51 51 0 0
(A) NAMES AND ADDRESSES OF ANY PARTY TO	(B) CITIZENSHIP	INTEREST HELD
		(C) BEFORE TRANSFER OR ASSIGNMENT (D) AFTER TRANSFER OR ASSIGNMENT

APPLICATION HOLDING AN ATTRIBUTABLE INTEREST		(1) Percentage Votes	(2) Percentage Total Assets (Equity plus Debt)	(1) Percentage Votes	(2) Percentage Total Assets (Equity plus Debt)
GREGORY H LIST; OTTUMWA, IA	US	49	49	100	100
or [Exhibit 6]					

I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations.

Typed or Printed Name of Person Signing BRUCE H LINDER	Typed or Printed Title of Person Signing TRANSFEROR
Signature	Date

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).


Section III - Licensee/Permittee

1.	Certification. Licensee/permittee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.	<input checked="" type="radio"/> Yes <input type="radio"/> No		
2.	Authorizations to be Assigned. List the authorized stations and construction permits to be assigned. Provide the Facility Identification Number and the Call Sign, or the Facility Identification Number and the File Number of the Construction Permit, and the location, for each station to be assigned. Include main stations, FM and/or TV translator stations, LPTV stations, FM and/or TV booster stations. [Enter Station Information]			
List the authorized stations and construction permits to be transferred. Provide the Facility Identification Number and the Call Sign, or the Facility Identification Number and the File Number of the Construction Permit, and the location, for each station to be transferred. Include main stations, FM and/or TV translator stations, LPTV stations, FM and/or TV booster stations.				
Facility ID Number	Call Sign	OR Construction Permit File Number	City	State
58762	KRKN	-	ELDON	IA
Facility ID Number	Call Sign	OR Construction Permit File Number	City	State
49902	KKSI	-	EDDYVILLE	IA
Facility ID Number	Call Sign	OR Construction Permit File Number	City	State
24207	KBIZ	-	OTTUMWA	IA
Facility ID Number	Call Sign	OR Construction Permit File Number	City	State
21915	KLEE	-	OTTUMWA	IA
Facility ID Number	Call Sign	OR Construction Permit File Number	City	State
21916	KOTM-FM	-	OTTUMWA	IA

Facility ID Number	Call Sign	OR Construction Permit File Number	City	State
24204	KTWA	-	OTTUMWA	IA
Facility ID Number	Call Sign	OR Construction Permit File Number	City	State
148554	K274CV	-	OTTUMWA	IA
Facility ID Number	Call Sign	OR Construction Permit File Number	City	State
146694	K299BA	-	OTTUMWA	IA

3.	<p>Agreements to Transfer Control of Station. Licensee/permittee certifies that:</p> <p>a. it has placed in its public inspection file(s) and submitted an exhibit to this item copies of all agreements to transfer control of the station(s);</p> <p>b. these documents embody the complete and final understanding between transferor(s) and transferee(s); and</p> <p>c. these agreements comply fully with the Commission's rules and policies.</p> <p>Exhibit Required</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>See Explanation in [Exhibit 7]</p>
4.	<p>Other Authorizations. List call signs, locations and facility identifiers of all other broadcast stations in which licensee/permittee or any party to the application has an attributable interest.</p>	<p><input checked="" type="radio"/> N/A</p> <p>[Exhibit 8]</p>
5.	<p>Character Issues. Licensee/permittee certifies that neither licensee/permittee nor any party to the application has or has had any interest in, or connection with:</p> <p>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</p> <p>b. any pending broadcast application in which character issues have been raised.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>See Explanation in [Exhibit 9]</p>
6.	<p>Adverse Findings. Licensee/permittee certifies that, with respect to the licensee/permittee and 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.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>See Explanation in [Exhibit 10]</p>
7.	<p>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.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
8.	<p>Auction Authorization. Licensee/permittee 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.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p> <p><input checked="" type="radio"/> N/A</p> <p>See Explanation in [Exhibit 11]</p>
9.	<p>Anti-Drug Abuse Act Certification. Licensee/permittee certifies that neither licensee/permittee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
10.	<p>Anti-Discrimination Certification. Licensee/permittee certifies that neither licensee/permittee nor any 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.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p><input type="radio"/> N/A</p> <p>See Explanation in [Exhibit 12]</p>

I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations.

Typed or Printed Name of Person Signing GREGORY H. LIST	Typed or Printed Title of Person Signing PRESIDENT
Signature 	Date 4/26/17

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Section IV - Transferee(s)

1.	Certification. Transferee(s) certify that it (they) have answered each question in this application based on its (their) review of the application instructions and worksheets. Transferee(s) further certify that where it (they) have made an affirmative certification below, this certification constitutes its (their) representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.	<input checked="" type="radio"/> Yes <input type="radio"/> No									
2.	Legal Name of the Transferee(s) GREGORY H LIST Mailing Address 416 EAST MAIN STREET <hr/> <table style="width:100%; border:none;"> <tr> <td style="width:33%; border:none;">City OTTUMWA</td> <td style="width:33%; border:none;">State or Country (if foreign address) IA</td> <td style="width:34%; border:none;">Zip Code 52501 -</td> </tr> <tr> <td style="border:none;">Telephone Number (include area code)</td> <td colspan="2" style="border:none;">E-Mail Address (if available)</td> </tr> </table>		City OTTUMWA	State or Country (if foreign address) IA	Zip Code 52501 -	Telephone Number (include area code)	E-Mail Address (if available)				
City OTTUMWA	State or Country (if foreign address) IA	Zip Code 52501 -									
Telephone Number (include area code)	E-Mail Address (if available)										
3.	Contact Representative (if other than transferee) _____ Firm or Company Name _____ Mailing Address _____ <hr/> <table style="width:100%; border:none;"> <tr> <td style="width:33%; border:none;">City</td> <td style="width:33%; border:none;">State or Country (if foreign address)</td> <td style="width:34%; border:none;">Zip Code</td> </tr> <tr> <td style="border:none;">Telephone Number (include area code)</td> <td colspan="2" style="border:none;">E-Mail Address (if available)</td> </tr> </table>		City	State or Country (if foreign address)	Zip Code	Telephone Number (include area code)	E-Mail Address (if available)				
City	State or Country (if foreign address)	Zip Code									
Telephone Number (include area code)	E-Mail Address (if available)										
If more than one transferee, submit the information requested in questions 2 and 3 for each transferee.		[Exhibit 13]									
4.	Nature of Applicant. Each transferee is: <table style="width:100%; border:none; margin-top:5px;"> <tr> <td style="width:33%; border:1px solid black;"><input checked="" type="radio"/> an individual</td> <td style="width:33%; border:1px solid black;"><input type="radio"/> a general partnership</td> <td style="width:34%; border:1px solid black;"><input type="radio"/> a for-profit corporation</td> </tr> <tr> <td style="border:1px solid black;"><input type="radio"/> a limited partnership</td> <td style="border:1px solid black;"><input type="radio"/> a not-for-profit corporation</td> <td style="border:1px solid black;"><input type="radio"/> a limited liability company (LLC/LC)</td> </tr> <tr> <td style="border:1px solid black;"><input type="radio"/> other</td> <td style="border:1px solid black;"></td> <td style="border:1px solid black;"></td> </tr> </table> a. If "other", describe nature of transferee in an Exhibit.		<input checked="" type="radio"/> an individual	<input type="radio"/> a general partnership	<input type="radio"/> a for-profit corporation	<input type="radio"/> a limited partnership	<input type="radio"/> a not-for-profit corporation	<input type="radio"/> a limited liability company (LLC/LC)	<input type="radio"/> other		
<input checked="" type="radio"/> an individual	<input type="radio"/> a general partnership	<input type="radio"/> a for-profit corporation									
<input type="radio"/> a limited partnership	<input type="radio"/> a not-for-profit corporation	<input type="radio"/> a limited liability company (LLC/LC)									
<input type="radio"/> other											
		[Exhibit 14]									
5.	Agreements to Transfer Control of Station. Transferee certifies that: <ol style="list-style-type: none"> a. the written agreements in the licensee/permittee's public inspection file and submitted to the Commission embody the complete and final agreement to transfer control of the station(s) specified in Section III, question 2; and b. these agreements comply fully with the Commission's rules and policies. 	<input checked="" type="radio"/> Yes <input type="radio"/> No [Exhibit 15]									
6.	Parties to the Application. <ol style="list-style-type: none"> a. List each transferee, and, if other than a natural person, its officers, directors, stockholders with attributable interests, non-insulated partners and/or members. If a corporation or partnership holds an attributable interest in any transferee, list separately its officers, directors, stockholders with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity. Attach additional pages if necessary. <table style="width:100%; border:none; margin-top:10px;"> <tr> <td style="width:50%; vertical-align:top;"> (1) Name and address of the transferee and each party to the application holding an attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the transferee first, officers next, then directors and, thereafter, remaining stockholders and other entities with attributable interests, and partners. </td> <td style="width:50%; vertical-align:top;"> (2) Citizenship. (3) Positional Interest: Officer, director, general partner, limited partner, LLC member, investor/creditor attributable under the Commission's equity/debt plus standard, etc. (4) Percentage of votes. (5) Percentage of total assets (equity plus debt). </td> </tr> </table> <p>[Enter Parties/Owners Information]</p> <hr/> <p style="text-align:center;">6a. Parties to the Application</p>		(1) Name and address of the transferee and each party to the application holding an attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the transferee first, officers next, then directors and, thereafter, remaining stockholders and other entities with attributable interests, and partners.	(2) Citizenship. (3) Positional Interest: Officer, director, general partner, limited partner, LLC member, investor/creditor attributable under the Commission's equity/debt plus standard, etc. (4) Percentage of votes. (5) Percentage of total assets (equity plus debt).							
(1) Name and address of the transferee and each party to the application holding an attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the transferee first, officers next, then directors and, thereafter, remaining stockholders and other entities with attributable interests, and partners.	(2) Citizenship. (3) Positional Interest: Officer, director, general partner, limited partner, LLC member, investor/creditor attributable under the Commission's equity/debt plus standard, etc. (4) Percentage of votes. (5) Percentage of total assets (equity plus debt).										

List each transferee, and, if other than a natural person, its officers, directors, stockholders with attributable interests, non-insulated partners and/or members. If a corporation or partnership holds an attributable interest in any transferee, list separately its officers, directors, stockholders with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity.

(1) Name and address of the transferee and each party to the application holding an attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the transferee first, officers next, then directors and, thereafter, remaining stockholders and other entities with attributable interests, and partners.

(2) Citizenship.

(3) Positional Interest: Officer, director, general partner, limited partner, LLC member, investor/creditor attributable under the Commission's **equity/debt plus** standard, etc.

(4) Percentage of votes.

(5) Percentage of total assets (equity plus debt).

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets (equity plus debt).
GREGORY H. LIST; OTTUMWA, IA	US	OFFICER/DIRECTOR	100	100

b. Applicant certifies that equity interests not set forth above are non-attributable.

Yes No

N/A

See Explanation in [Exhibit 17]

7. **Other Authorizations.** List call signs, locations, and facility identifiers of all other broadcast stations in which transferee or any party to the application has an attributable interest.

N/A

[Exhibit 18]

8. **Multiple Ownership.**

a. Is the transferee or any party to the application the holder of an attributable radio or television joint sales agreement or an attributable radio or television time brokerage agreement for the subject station(s) or any other stations in the same market as the station(s) subject to this application?

Yes No

[Exhibit 19]

If "Yes," radio applicants must submit as an Exhibit a copy of each such agreement for radio stations.

b. Transferee certifies that the proposed transfer complies with the Commission's multiple ownership rules and cross-ownership rules.

Yes No

[Exhibit 20]

AM and/or FM Radio Applicants only: If "Yes," submit an Exhibit providing information regarding the market, broadcast station(s), and other information necessary to demonstrate compliance with 47 C.F.R. § 73.3555(a).

All Applicants: If "No," submit as an Exhibit a detailed explanation in support of an exemption from, or waiver of, 47 C.F.R. § 73.3555.

c. Transferee certifies that the proposed transfer:

Yes No

See Explanation in

[Exhibit 21]

1. does not present an issue under the Commission's policies relating to media interests of immediate family members;
2. complies with the Commission's policies relating to future ownership interests; and
3. complies with the Commission's restrictions relating to the insulation and nonparticipation of non-party investors and creditors.

d. Does the Transferee claim status as an "eligible entity," that is, an entity that qualifies as a small business under the Small Business Administration's size standards for its industry grouping (as set forth in 13 C.F.R. § 121-201), and holds (1) 30 percent or more of the stock or partnership interests and more than 50 percent of the voting power of the corporation or partnership that will own the media outlet; or (2) 15 percent or more of the stock or partnership interests and more than 50 percent of the voting power of the corporation or partnership that will own the media outlet, provided that no other person or entity owns or controls more than 25 percent of the outstanding stock or partnership interests; or (3) more than 50 percent of the voting power of the corporation that will own the media outlet (if such corporation is a publicly traded company)?

Yes No

See Explanation in [Exhibit 22]


All applicants: If "Yes," submit as an Exhibit a detailed showing demonstrating proof of status as an eligible entity.

e.

Yes No

	Does this transfer include a grand-fathered cluster of stations? All applicants: If "Yes", applicant certifies that it will come in compliance by divesting the necessary station(s) within 12 months of the consummation of this transaction to:	
	A. An Eligible Entity (as defined in Item 8d, above). B. An Irrevocable Trust that will transfer the station(s) to an Eligible Entity. All applicants: If "Yes" to Item 8e A or B: Submit as an Exhibit a copy of the form of irrevocable trust agreement providing for the transfer of the station(s) to an Eligible Entity.	<input checked="" type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 23]
9.	Character Issues. Transferee certifies that neither transferee nor any party to 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.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 24]
10.	Adverse Findings. Transferee certifies that, with respect to the transferee and 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.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 25]
11.	Alien Ownership and Control. Transferee certifies that it complies with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 26]
12.	Financial Qualifications. Transferee certifies that sufficient net liquid assets are on hand or are available from committed sources to consummate the transaction and operate the station(s) for three months.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 27]
13.	Program Service Certification. Transferee certifies that it is cognizant of and will comply with its obligations as a Commission licensee to present a program service responsive to the issues of public concern facing the station's community of license and service area.	<input checked="" type="radio"/> Yes <input type="radio"/> No
14.	Auction Authorization. Transferee certifies that where less than five years have passed since the issuance of the construction permit and the permit had been acquired in an auction through the use of a bidding credit or other special measure, it would qualify for such credit or other special measure.	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A See Explanation in [Exhibit 28]
15.	Anti-Drug Abuse Act Certification. Licensee/permittee certifies that neither licensee/permittee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.	<input checked="" type="radio"/> Yes <input type="radio"/> No
16.	EEO. Does the applicant propose to employ five or more full-time employees? If the answer is Yes, the applicant must include an EEO program called for in the separate Model EEO Program Report (FCC Form 396-A)	<input checked="" type="radio"/> Yes <input type="radio"/> No

I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations. I hereby waive any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and request an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)

Typed or Printed Name of Person Signing GREGORY H LIST	Typed or Printed Title of Person Signing TRANSFEREE
Signature 	Date 4/26/17

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

Exhibit 15

Description: SEE EXHIBIT/ATTACHMENT 7

Attachment 15

Exhibit 16

Description: FM TRANSLATOR PARENT STATIONS

K274CV WILL CONTINUE TO REBROADCAST KBIZ(AM)

K299BA WILL CONTINUE TO REBROADCAST KLEE(AM)

Attachment 16

Exhibit 20

Description: MULTIPLE OWNERSHIP

O-TOWN COMMUNICATIONS, INC., IS THE LICENSEE OF
 KKSI(FM) EDDYVILLE, IA
 KRKN(FM) ELDON, IA
 KTWA(FM) OTTUMWA, IA
 KOTM-FM OTTUMWA, IA
 KLEE(AM) OTTUMWA, IA
 KBIZ(AM) OTTUMWA, IA

EACH COMMUNITY OF LICENSE IS SITUATED WITHIN WAPELLO COUNTY, IOWA, WHICH IS OUTSIDE OF ANY DEFINED ARBITRON METRO MARKET. ACCORDINGLY, THIS MULTIPLE OWNERSHIP STUDY IS EVALUATED USING THE COMMISSION'S INTERIM CONTOUR-OVERLAP METHODOLOGY.

THIS COMBINATION OF 4 FM/2 AM STATIONS WAS APPROVED ON A LONG FORM 314 IN FCC FILE MAIN NO. BALH-20131224AAP; GRANTED FEBRUARY 28, 2014.

SECTION 73.3555 OF THE COMMISSION'S RULES PROVIDES THAT IN A RADIO MARKET WITH BETWEEN 15 AND 29 (INCLUSIVE) FULL-POWER, COMMERCIAL AND NONCOMMERCIAL RADIO STATIONS, A PARTY MAY OWN OR CONTROL NOT MORE THAN 6 COMMERCIAL RADIO STATIONS IN TOTAL AND NOT MORE THAN 4 COMMERCIAL STATIONS IN THE SAME SERVICE (AM OR FM).

AS SHOWN ON THE ATTACHED EXHIBITS, THERE ARE GREATER THAN 15 STATIONS SERVING THE PROPOSED 4 FM/2 AM MARKET STUDY AREA. ACCORDINGLY, THIS PROPOSED COMBINATION OF STATIONS COMPLIES WITH THE COMMISSION'S MULTIPLE OWNERSHIP RULES.

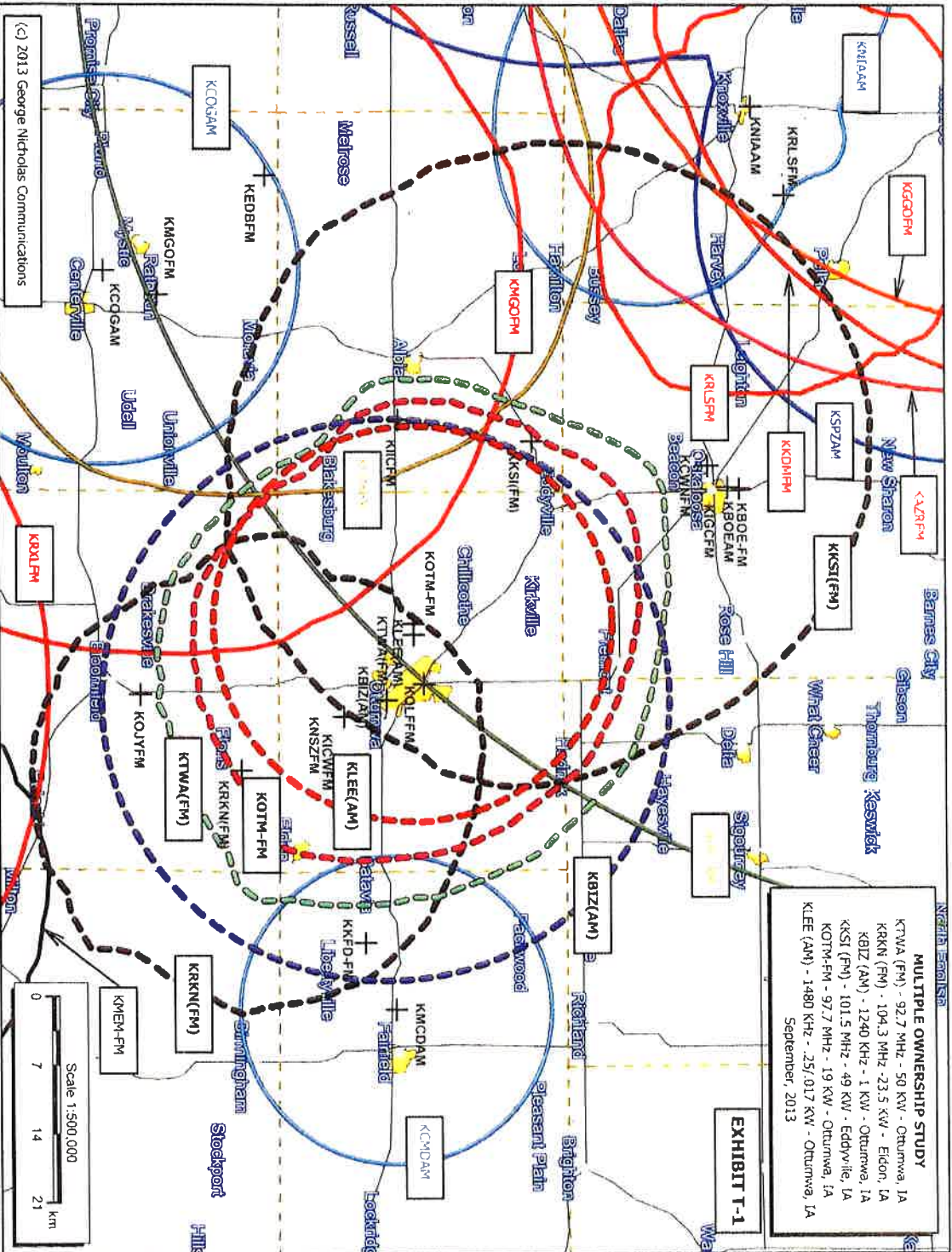
Attachment 20

Description
Contour Service Map
List of stations in the market study area

The attached Figure shows all city-grade contours of all currently licensed commercial and non-commercial stations in the subject market defined by the six reference stations. For clarity, the stations whose transmitter sites are within the predicted city-grade contours are shown just by their transmitter sites.

The following stations are included in the analysis:

CALL	CITY/STATE	FREQ	POWER	N. LAT	W. LONG	DIST	BEARING
KBIZ .L	OTTUMWA IA	1240	1.000kW	410900 N	922323 W	016.2	334.3
KKSI .L	Eddyville IA	269C2	49.000kW	410757 N	924212 W	044.5	311.5
KRKN .L	Eldon IA	282C3	33.500kW	405206 N	921820 W	000.0	000.0
KTWA .L	Ottumwa IA	224C2	50.000kW	410129 N	922809 W	022.2	321.7
KAZR .L	Fella IA	277C1	100.000kW	413218 N	931758 W	111.7	312.2
KBOE .L	OSKALOOSA IA	740	0.229kW	411915 N	923844 W	057.8	330.6
KBOEFM.L	Oskaloosa IA	285C2	10.000kW	411915 N	923844 W	057.8	330.6
KCOG .L	CENTERVILLE IA	1400	0.500kW	404440 N	925432 W	052.7	255.0
KCWN .L	New Sharon IA	260C2	25.000kW	411732 N	924024 W	056.3	326.9
KELREM.L	Chariton IA	287C2	50.000kW	410049 N	931728 W	084.5	281.4
KGGO .L	Des Moines IA	258C	100.000kW	413754 N	932724 W	128.4	311.8
KIGC .L	Oskaloosa IA	204A	0.230kW	411837 N	923849 W	056.8	329.9
KIIKFM.L	Fairfield IA	240A	4.100kW	405847 N	920545 W	021.6	054.8
KKDM .L	Des Moines IA	298C1	100.000kW	413838 N	931720 W	119.2	316.7
KLBA .L	ALBIA IA	1370	0.500kW	410034 N	924346 W	039.0	293.9
KLBAFM.L	Albia IA	244C3	10.000kW	410147 N	924712 W	044.3	294.1
KLEE .L	OTTUMWA IA	1480	0.250kW	410128 N	922856 W	022.8	319.5
KMCD .L	FAIRFIELD IA	1570	0.250kW	410025 N	920050 W	029.0	057.7
KMEMFM.L	Memphis MO	283C3	25.000kW	402959 N	920958 W	042.6	163.9
KMGO .L	Centerville IA	254C1	100.000kW	404734 N	925247 W	049.2	260.3
KNIA .L	KNOXVILLE IA	1320	0.500kW	411950 N	930634 W	084.8	307.6
KOJY .L	Fairfield IA	295C3	14.000kW	404639 N	922354 W	012.8	217.7
KOTMFM.L	Ottumwa IA	249C3	19.000kW	410129 N	922856 W	022.8	319.5
KPSZ .L	DES MOINES IA	940	10.000kW	412835 N	932226 W	112.2	307.4
KRLS .L	Knoxville IA	221C3	15.500kW	412140 N	930015 W	080.2	313.3
KRXL .L	Knoxville MO	281C	50.000kW	401434 N	922542 W	070.2	188.5
WHO .L	DES MOINES IA	1040	50.000kW	413910 N	932101 W	123.5	315.3



PROOF OF PUBLICATION

STATE OF IOWA
WAPELLO COUNTY

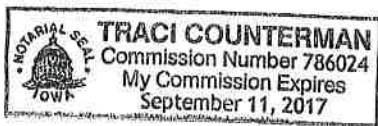
I, Wanda Moeller, being duly sworn on my oath, say I am the Publisher of the Ottumwa Courier, a newspaper printed in said Wapello County, Iowa and of general circulation there in, and that the advertisement Public Notice On April 26th, 2017 O-Town Communication

Ottumwa Radio Wanda Moeller hereto attached was published in said newspaper for 4 days to-wit:

05/09/2017 05/12/2017 05/16/2017 05/19/2017

Subscribed and sworn to before me, and in my presence, by the said

19th day of May, 2017



Traci Counterman

Notary Public

In and for Wapello County

Printer's fee \$21.30

COPY OF ADVERTISEMENT

Public Notice
On April 26th, 2017, O-Town Communications, Inc., filed an application with the Federal Communications Commission seeking consent to transfer control of the broadcast license of radio stations KBIZ operating on 1240 kHz, KLEE operating on 1480 kHz, KOTM-FM operating on 97.7, KTWA operating on 92.7, at Ottumwa, Iowa, from Bruce Linder to Gregory H. List. A complete copy of the application is available for public inspection during regular business hours at 416 E. Main Street, Ottumwa, IA.

PROOF OF PUBLICATION

STATE OF IOWA
WAPELLO COUNTY

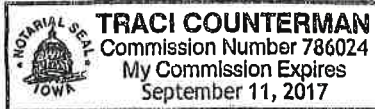
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OTTUMWA RADIO

416 E. Main St
 Ottumwa, IA 52501
 info@ottumwaradio.com

Ph: 641-694-5563
 Toll Free: 800-794-6869
 Fax: 641-694-5832

KKSI FM
 KRKN FM
 KBIZ AM/FM
 KTWA FM
 KLEE AM/FM
 KOTM FM

NEW ORDER
 CHANGE ORDER
 STOP ORDER
 CART # _____
 CONTRACT # _____
 ACCT # _____
 PROMOS

NAME ON LOG: _____
 BILL TO: _____
 ADDRESS: _____
 CITY, STATE, ZIP: _____
 PHONE #: _____
 E-MAIL ADDRESS: _____
 SPECIAL INST: _____
 CO-OP FOR: _____
 START DATE: _____
 END DATE: _____

:10 SEC
 :15 SEC
 :30 SEC
 :60 SEC
 :90 SEC
 REMOTE

PROGRAMS: _____
 PRE-PAID
 CASH
 CHECK
 CREDIT CARD
 CHARGE

NUMBER OF ADS	AD RATE	TOTAL
KKSI FM		
KRKN FM		
KBIZ AM/FM		
KTWA FM		
KLEE AM/FM		
KOTM FM		
TOTAL ADS:		
EVERY OTHER WEEK?	PRODUCTION:	
	TALENT:	
	OTHER CHARGES:	
NET	TOTAL:	
GROSS		

HOUR	MON	TUE	WED	THUR	FRI	SAT	SUN
12a-1a							
1a-2a							
2a-3a							
3a-4a							
4a-5a							
5a-6a							
6a-7a							
7a-8a							
8a-9a							
9a-10a							
10a-11a							
11a-12p							
12p-1p							
1p-2p							
2p-3p							
3p-4p							
4p-5p							
5p-6p							
6p-7p							
7p-8p							
8p-9p							
9p-10p							
10p-11p							
11p-12p							

AUTHORIZED SIGNATURE / DATE _____ SALES REPRESENTATIVE _____

CONTRACT AGREEMENT: This is a firm contract for the period specified. It is understood that premature cancellation must be agreed to by O-Town Communications, Inc. (Ottumwa Radio) and will result in the advertiser (sponsor) being billed at earned rate, and all moneys due at the time of cancellation. In return for said service, the Advertiser agrees that PAYMENTS are to be made to Radio Station O-Town Communications, Inc. (Ottumwa Radio) upon receipt of statement. Any balance not paid by the last Sunday of the month shall bear interest at the rate of 3% per month until paid in full. The station shall reserve the right to pre-empt any broadcast, or any promotion thereof, covered by public interest, convenience or necessity. The station shall attempt to reschedule such pre-empted announcements or programs of sponsor the same broadcast day, or if that is not possible, as soon as possible thereafter. In the event a program or announcement cannot be rescheduled, the station will notify the sponsor and the broadcast will be considered cancelled without affecting rate, discounts, or rights provided under this contract, except that the advertiser (sponsor) shall not be required to pay for the cancelled broadcast. If legal proceedings are brought to collect on this contract, O-Town Communications, Inc. (Ottumwa Radio) shall be entitled to collect all reasonable costs and expenses of suit, included but not limited to, reasonable attorney's fees. Further, the parties agree that venue for any suit on this contract shall be in Wapello County, Iowa.

Ottumwa Radio now accepts most major credit cards. A 3% convenience fee will be added for credit card payments.

Ottumwa Radio Copy Information Sheet

 KCSI

 KRKN
 KBIZ

 KTWA
 KLEE

 KOTM

Name on Log:	Ownership transfer	Today's Date:	4/27/17
Firm/Agency:		Date Due:	5/7/17
Contact Name:		Salesperson:	<i>[Signature]</i>
Phone/Fax:		E-mail this to:	
Client E-Mail:		(other media)	
Client Approval:	To Approve Hard Copy:	To hear final product: Call:	E-mail Script/mp3 to Client at:

Spot Length:	30	New Copy:		Replace:		Rotate:	
COOP:	INVOICE:	<input checked="" type="checkbox"/>	SPOT NAME:				

See attached
have Melissa Do ads

Done
mf

per station

	Cart #	Start Date	End Date	# of CARTS	Cart #	Start Date	End Date
KCSI	62718	5/7/17	5/12/17	(1)	62722	5/7	5/12
KRW	62719	5/7	5/12		62723	5/7	5/12/17
KBIZ	62720	5/7	5/12				
KTWA	62721	5/7	5/12				

Klee
Kotm

Ottumwa Radio

KKSI-FM KRKN-FM KTWA-FM KOTM-FM
KBIZ-AMFM KLEE-AMFM

416 E. MAIN, OTTUMWA, IA 52501

Ph.: 641-684-5563 fax: 641-684-5832

OTTUMWA RADIO

Advertiser ID: 531

Amount Paid

531-00006-0001	5/28/2017	1
Official Invoice	Date	Page

DETACH AND RETURN WITH PAYMENT

531-00006-0001

O 5/28/2017

1

OTTUMWA RADIO
Attn: GREG LIST
416 E MAIN
OTTUMWA, IA 52501

Purchase Order Number:

Est. Number:

Co-Op:

Description: OWNERSHIP TRANSFER - ALL STATION

Salesperson: List, Greg

Date	Day	Length		Qty	Rate	Total
Copy: KKSI - OWNERSHIP TRANSFER						
5/7/2017	Sun	:30	KKSI-FM 05:50:00 PM	1	\$0.00	\$0.00
5/8/2017	Mon	:30	KKSI-FM 08:46:00 AM	1	\$0.00	\$0.00
5/10/2017	Wed	:30	KKSI-FM 04:23:30 PM	1	\$0.00	\$0.00
5/12/2017	Fri	:30	KKSI-FM 07:20:30 AM	1	\$0.00	\$0.00

We accept Master Card, VISA, American Express and Discover. (Add 3% for credit card payments.)

Thank You for your business!

Quantity	4	Total	\$0.00
Total Due			\$0.00

INVOICE