Federal Communications Commission Washington, D. C. 20554

Approved by OMB 3060-0627 Expires 01/31/98

FCC 302-AM APPLICATION FOR AM BROADCAST STATION LICENSE

(Please read instructions before filling out form

FOR COMMISSION USE ONLY	
FILE NO.	

(Please read instructions before filling out form.	FILE NO.						
SECTION I - APPLICANT FEE INFORMATION							
PAYOR NAME (Last, First, Middle Initial)							
Venture Broadcasting LLC							
MAILING ADDRESS (Line 1) (Maximum 35 characters) 100 Main Street							
MAILING ADDRESS (Line 2) (Maximum 35 characters) Suite 201		THE PARTY OF THE P					
CITY Portland	STATE OR COUNTRY (if for	eign address)	ZIP CODE 37148				
TELEPHONE NUMBER (include area code) 6153253250	CALL LETTERS WQKR	OTHER FCC IDEN	NTIFIER (If applicable)				
A. Is a fee submitted with this application? B. If No, indicate reason for fee exemption (see 47 C.F.R. Section Governmental Entity Noncommercial educations		ſ	√ Yes No				
C. If Yes, provide the following information:	tional licensee Oth	ner (Please explain)	:				
Enter in Column (A) the correct Fee Type Code for the service you ar Fee Filing Guide." Column (B) lists the Fee Multiple applicable for this (A) (B)	application. Enter fee amoun	des may be found in t due in Column (C)	n the "Mass Media Services				
FEE TYPE	(C) FEE DUE FOR FEE TYPE CODE IN COLUMN (A) \$ 725.00	F	FOR FCC USE ONLY				
To be used only when you are requesting concurrent actions which result in a requirement to list more than one Fee Type Code.							
(A) 0 0 0 1	(C)		OR FCC USE ONLY				
ADD ALL AMOUNTS SHOWN IN COLUMN C, AND ENTER THE TOTAL HERE. THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED REMITTANCE.	TOTAL AMOUNT REMITTED WITH THIS APPLICATION \$ 725.00	F	OR FCC USE ONLY				

SECTION II ADDITIONS	IT INCODMATION					
SECTION II - APPLICAN 1. NAME OF APPLICANT	II INFORMATION					
Venture Broadcasting LLC MAILING ADDRESS 100 Main Street Suite 201						
CITY Portland			STATE TN		ZIP CODE 37148	***************************************
2. This application is for:	Commercial		Noncomn	nercial		
	AM Direc	tional	✓ AM N	lon-Directional		
Call letters WQKR	Community of License Portland TN	Constructi	on Permit File No.	Modification of Construction Permit File No(s).	Expiration Date of L Construction Permit	
Is the station no accordance with 47 C.F. If No, explain in an Exhibit.		to auton	natic program	test authority in	✓ Yes	No
4. Have all the terms construction permit beer If No, state exceptions in	•	ations se	t forth in the a	above described	Yes Exhibit No.	No
5. Apart from the chang the grant of the underly	ges already reported, has ying construction permit I in the construction perm	which we	ould result in a	inv statement or	✓ Yes	No
6. Has the permittee file certification in accordance	ed its Ownership Report (I se with 47 C.F.R. Section	FCC Forr 73.3615(n 323) or owner b)?	rship	Yes Does not ap	No ply
If No, explain in an Exhib	it.				Exhibit No.	
or administrative body wi criminal proceeding, brou	ng been made or an adve th respect to the applican ught under the provisions ated antitrust or unfair it; or discrimination?	it or partion of any la	es to the application and the second second in the second second in the second	ation in a civil or e following: any	Yes √	Νo
involved, including an ide (by dates and file numb information has been e required by 47 U.S.C. Se of that previous submissi the call letters of the sta	tach as an Exhibit a full entification of the court or ers), and the disposition arlier disclosed in connction 1.65(c), the applicar on by reference to the filtion regarding which the filing; and (ii) the disposit	administration of the linection was need or number application	rative body and tigation. Whe ith another apoly provide: (i) or the case of th	the proceeding re the requisite plication or as an identification an application, .65 information	Exhibit No.	

8. Does the applicant, or any party to the application, have a petition on file to migrate to the expanded band (1605-1705 kHz) or a permit or license either in the existing band or expanded band that is held in combination (pursuant to the 5 year holding period allowed) with the AM facility proposed to be modified herein?							
If Yes, provide particulars as an Exhibit.		Exhibit No.					
The APPLICANT hereby 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 use of the same, whether by license or otherwise, and requests and authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended).							
The APPLICANT acknowledges that all the statements made in this application and attached exhibits are considered material representations and that all the exhibits are a material part hereof and are incorporated herein as set out in full in							
CERTIF	ICATION						
 By checking Yes, the applicant certifies, that, in the case of an individual applicant, he or she is not subject to a denial of federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862, or, in the case of a non-individual applicant (e.g., corporation, partnership or other unincorporated association), no party to the application is subject to a denial of federal benefits that includes FCC benefits pursuant to that section. For the definition of a "party" for these purposes, see 47 C.F.R. Section 1.2002(b). 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. 							
Name	Signature						
Ted Johnson		i					
Title Managing Member	Date 4/19/2021	Telephone Number 6153253250					
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

FCC NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

The solicitation of personal information requested in this application is authorized by the Communications Act of 1934, as amended. The Commission will use the information provided in this form to determine whether grant of the application is in the public interest. In reaching that determination, or for law enforcement purposes, it may become necessary to refer personal information contained in this form to another government agency. In addition, all information provided in this form will be available for public inspection. If information requested on the form is not provided, the application may be returned without action having been taken upon it or its processing may be delayed while a request is made to provide the missing information. Your response is required to obtain the requested authorization.

Public reporting burden for this collection of information is estimated to average 639 hours and 53 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, can be sent to the Federal Communications Commission, Records Management Branch, Paperwork Reduction Project (3060-0627), Washington, D. C. 20554. Do NOT send completed forms to this address.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, P.L. 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3), AND THE PAPERWORK REDUCTION ACT OF 1980, P.L. 96-511, DECEMBER 11, 1980, 44 U.S.C. 3507.

Name of Applica Venture B							
PURPOSE OF A		·	₹: (check one)				
	Station License			leasurement of Po	ower		
1. Facilities auth							
Call Sign WQKR	File No. of Cor (if applicable)	struction Permit	Frequency (kHz)	Hours of Ope	eration		in kilowatts
			1270	UNL		Night 0.043	Day 1.0
2. Station location	on	***************************************					
State Tennesse	~ ^			City or Town	ı		
				Portland			
3. Transmitter lo							
State	County			City or Town		Street address (or other identified	fication)
TN	Robertso	<u>ი</u>		Portland		Shady Park R	•
4. Main studio lo							
State	County			City or Town		Street address (or other identif	ination)
TN	Robertson			Portland		100 N Main Suit	
5. Remote contro	ol point location (specify only if au	uthorized direction	onal antenna)			· · · · · · · · · · · · · · · · · · ·
State	County			City or Town		Street address (or other identification)	
7. Does the samp Attach as an Ex	pling system med						Yes No Not Applicable hibit No.
8. Operating cons	stants:						
RF common point modulation for nig 0.737	t or antenna curre tht system	ent (in amperes)	without	RF common pomodulation for 3.55	oint or antenna day system	current (in amper	es) without
Measured antenna or common point resistance (in ohms) at operating frequency Night Day Measured antenna or common point reactance (in ohms) at operating frequency Night Day					(in ohms) at		
79		79		Night Day 104			
Antenna indication	ns for directional	operation					
Antenna monitor Towers Phase reading(s) in degrees			Antenna monitor sample current ratio(s) Antenna base		pase currents		
		Night	Day	Night	Day	Night	Day

	·						

SECTION III - Page 2

9. Description of antenna system ((f directional antenna is used, the information requested below should be given for each element of the array. Use separate sheets if necessary.)

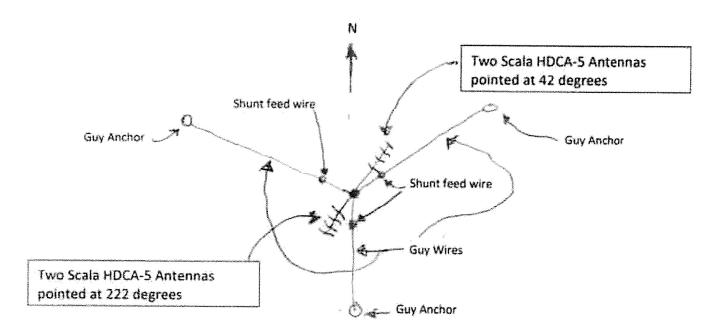
Tuna Dadiata		T		T	
Type Radiator	Overall height in meters of radiator above base insulator, or above base, if grounded.	Overall height in meters above ground (without obstruction lighting)		Overall height in meters above ground (include obstruction lighting)	If antenna is either top loaded or sectionalized, describe fully in an Exhibit.
Folded unipo	1	60		61	Exhibit No.
Excitation	Series	Shunt			
Geographic coordinatower location.	ates to nearest second. For direc	tional antenna	give coordinate	es of center of array. For si	ngle vertical radiator give
North Latitude 36	° 36 ' 3	8.7 "	West Longitud	^{de} 86 ° 34	52.2
If not fully described antenna mounted on	above, attach as an Exhibit furth tower and associated isolation ci	ner details and rcuits.	dimensions inc	cluding any other	Exhibit No.
Also, if necessary f dimensions of ground	or a complete description, attac d system.	h as an Exhi	bit a sketch of	the details and	Exhibit No.
10. In what respect,	if any, does the apparatus constr	ucted differ fro	m that describe	ed in the application for con	Struction permit or in the
permit? N/A					
1					
L					
11. Give reasons for	the change in antenna or commo	n point resista	nce.		
The insta	sllation of an LDTV transm	itting anten	na has chan	ged the common poin	it impedance
					- Inpodantos.
I certify that I represe information and that it	ent the applicant in the capacity t is true to the best of my knowled	indicated belo ge and belief.	w and that I ha	ve examined the foregoing	statement of technical
Name (Please Print o	r Type)	s	ignature (check	appropriate box below)	
Gregory L. Bes	;t		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Address (include ZIP	Code)	Da	ate		
16100 Outlook	Ave		4/16/2021		
Stillwell, KS	DA ISPALITO A LITERA SIL E SILVE SI LIBERRA MARIETTA PER SILVERA DE LITERA MARIETTA DE LA CONTRACA DEL CONTRACA DE LA CONTRACA DEL CONTRACA DE LA CONTRACA DE LA CONTRACA DEL	Te	elephone No. (Ir 81679229	nclude Area Code)	
Technical Direct	or	√	Registered F	Professional Engineer	
Chief Operator		✓	Technical Co	onsultant	
Other (specify)					

FCC 302-AM (Page 5) August 1995

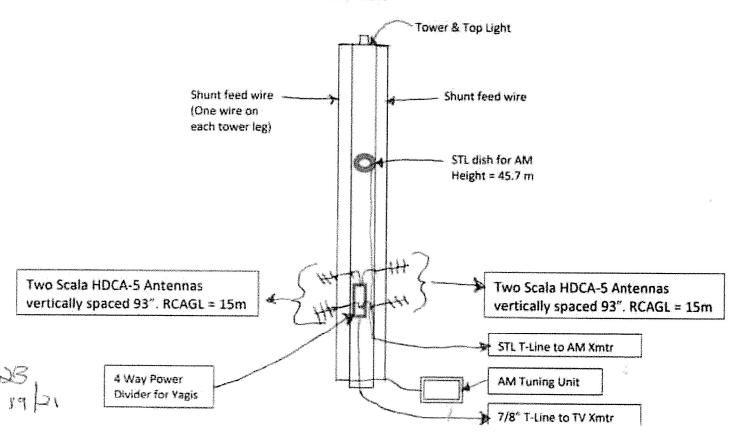
PORTLAND TRANSMITTER SITE - EXHIBIT #1

WQKR AM & WDHC-LD

OVERHEAD VIEW



SIDE VIEW



GREG BEST CONSULTING, INC.

16100 Outlook Avenue Scheell KS 66085 816-792-2913

April 16, 2021

GROUND SYSTEM FOR WQKR-EXHIBIT #2

The ground system for WQKR consists of 120 buried copper radial wires equally spaced.

Sincerely,

Consulting Engineer

Lugar 2 Bet PE