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July 9, 2010

\* NOT ADMITTED IN VIRGINIA

**By Federal Express**

Federal Communications Commission  
Media Bureau  
P.O. Box 979089  
St. Louis, MO 63197-9000

PLEASE STAMP  
AND RETURN  
THIS COPY TO LGP  
FLETCHER, HEALD & HILDRETH

Re: Live Sports Radio, LLC  
FRN: 0017-5077-16  
Request for Special Temporary Authority to  
Operate a Low Power Television Facility  
BMW Championship, Lemont, Illinois

Dear Sir/Madam:

Live Sports Radio, LLC, ("LSR"), via undersigned counsel, hereby requests special temporary authority ("STA") to operate a low power television facility within the Analog Channel 5 band at the BMW Championship at Cog Hill Golf and Country Club, Lemont, Illinois, from September 6 through September 12, 2010.

This STA is requested to allow LSR to provide continuous live coverage of the BMW Championship Golf Tournament to the spectators of the event at the Cog Hill Golf and Country Club who otherwise would not be able to hear the event coverage. The PGA has sanctioned LSR to provide continuous live coverage of the event. This service will allow the attendees to hear the play-by-play of events at the PGA Championship.

Without this service, no on-site live audio coverage will be available to the spectators. In addition, the service will provide a significant public interest benefit – it is the only way to communicate with attendees in the event of severe weather, a terrorist attack, or other emergency and provide the attendees with potentially life-saving instructions. There is no other communication system available to spectators that is either feasible or practical for this purpose.

FLETCHER, HEALD & HILDRETH, P.L.C.

July 9, 2010

Page Two

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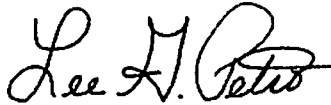
As detailed in the attached engineering statement prepared by Daniel G. Ryson of Cavell, Mertz & Associates, Inc., the proposed operation on Analog LPTV Channel 5 will not cause objectionable interference to any existing television or low power television operators. Further, there will be no construction of a new tower, nor will a tower or other mounting device (i.e., pipe) be installed that would impact air travel.

The undersigned has been authorized to state that no party to the applicant is 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.

Also enclosed is the Fee Receipt issued by the FCC's Fee Filer System indicating that the filing fee of \$170.00 (Fee Code MGL) has been paid online. In addition, a self-addressed Federal Express envelope and an extra copy of this request is enclosed, and it is respectfully requested that the Commission date-stamp and return the extra copy to undersigned counsel in the envelope provided.

Please contact undersigned counsel should you have any questions regarding this request.

Respectfully submitted,

A handwritten signature in cursive script, appearing to read "Lee G. Petro".

Lee G. Petro

*Counsel for Live Sports Radio, LLC.*

Enclosures

### Section III - Engineering

#### TECHNICAL SPECIFICATIONS

Ensure that the specifications below are accurate. Contradicting data found elsewhere in this application will be disregarded. All items must be completed. The response "on file" is not acceptable.

#### TECH BOX

1. Channel: 5 (Between 76.7 and 81.7 MHz)

2. Frequency Offset:

☐ No offset      ☒ Zero offset      ☐ Plus offset      ☐ Minus offset

3. Translator Input Channel No. N/A

4. Primary station proposed to be rebroadcast:

Call Sign	City	State	Channel
N/A	N/A	N/A	N/A

5. Antenna Location Coordinates: (NAD 27)

41° 40' 39" ☒ N ☐ S Latitude  
87° 57' 11" ☐ E ☒ W Longitude

6. Antenna Structure Registration Number: N/A

☒ Not applicable      ☐ FAA Notification Filed with FAA

7. Antenna Location Site Elevation Above Mean Sea Level: 219.5 meters

8. Overall Tower Height Above Ground Level: 18.5 meters

9. Height of Radiation Center Above Ground Level: 18.5 meters

10. Maximum Effective Radiated Power (ERP) Towards Radio Horizon: 0.03 kW

11. Maximum ERP in any Horizontal and Vertical Angle: 0.03 kW

Based on a study of all authorized stations in the Commission's CDBS database, it was determined that this channel would be best suited for the proposed operation. The proposed facility either complies with the Commission's LPTV contour overlap protection requirements or causes no additional population interference in excess of the Commission's limit when studied per OET Bulletin No. 69. Nevertheless, the applicant recognizes the secondary status provided under STA and will cease operation or reduce power as necessary in the event actual interference occurs. According to information provided by the applicant, no portion of the antenna will extend above permanent buildings or structures.

12. Transmitting Antenna: ☒ Nondirectional ☐ Directional "Off-the-shelf" ☐ Directional composite

Manufacturer Custom	Model VHF Ground Plane
------------------------	---------------------------

Directional Antenna Relative Field Values:

Rotation: \_\_\_\_\_° ☐ No rotation ☒ N/A (Nondirectional)

Degree	Value	Degree	Value	Degree	Value	Degree	Value	Degree	Value	Degree	Value
0		60		120		180		240		300	
10		70		130		190		250		310	
20		80		140		200		260		320	
30		90		150		210		270		330	
40		100		160		220		280		340	
50		110		170		230		290		350	
Additional Azimuths											

**NOTE:** In addition to the information called for in this section, an explanatory exhibit providing full particulars must be submitted for each question for which a "No" response is provided.

**CERTIFICATION**

13. **Interference.** The proposed facility complies with all of the following applicable rule sections. ☒ Yes ☐ No See Explanation in Exhibit No.  
Check all those that apply.

**TV broadcast analog system protection.**

- a. ☐ 47 C.F.R. Section 74.705. (Intended for Post-Transition Operation.)

**Digital TV station protection.**

- b. ☒ 47 C.F.R. Section 74.706.

**Low Power TV and TV translator station protection.**

- c. ☒ 47 C.F.R. Section 74.707.

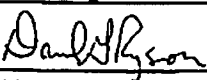
14. **Environmental Protection Act.** The proposed facility is excluded from environmental processing under 47 C.F.R. Section 1.1306 (*i.e.*, the facility will not have a significant environmental impact and complies with the maximum permissible radiofrequency electromagnetic exposure limits for controlled and uncontrolled environments). Unless the applicant can determine RF compliance. An Exhibit is required. ☒ Yes ☐ No See Explanation in Exhibit No.  
Exhibit No.

By checking "Yes" above, the applicant also certifies that it, in coordination with other users of the site, will reduce power or cease operation as necessary to protect persons having access to the site, tower or antenna from radiofrequency electromagnetic exposure in excess of FCC guidelines.

**PREPARER'S CERTIFICATION ON PAGE 6 MUST BE COMPLETED AND SIGNED.**

### SECTION III PREPARER'S CERTIFICATION

I certify that I have prepared Section III (Engineering Data) on behalf of the applicant, and that after such preparation, I have examined and found it to be accurate and true to the best of my knowledge and belief.

Name Daniel G. Ryson		Relationship to Applicant (e.g., Consulting Engineer) Consultant	
Signature 		Date July 8, 2010	
Mailing Address Cavell, Mertz & Associates, Inc.; 7839 Ashton Avenue			
City Manassas		State or Country (if foreign address) Virginia	ZIP Code 20109-2883
Telephone Number (include area code) (703) 392-9090		E-Mail Address (if available) dryson@cavellmertz.com	

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).



## Electronic Form 159

### Payment Confirmation

Your transaction has been approved. For your records, please note the following:

REMITTANCE ID NUMBER :	1807774
AUTHORIZATION NUMBER :	268701
AMOUNT PAID :	\$170.00

[PRINT FORM 159](#)[CLOSE](#)

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[FCC Fees](#)[Customer Service](#)[Web Policies / Privacy  
Policy](#)[FCC Home Page](#)

If you have any questions or concerns please contact your licensing system help desk.

**Remittance ID:1807774 Authorization****Number:268701****Successful Authorization -- Date Paid: 7/8/10****FILE COPY ONLY!!**

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING  (1) LOCKBOX #979089	FEDERAL COMMUNICATIONS COMMISSION <b>REMITTANCE ADVICE</b> <b>FORM 159</b> PAGE NO 1 OF 1		APPROVED BY OMB 3060-059	
			SPECIAL USE	
			FCC USE ONLY	
<b>SECTION A - Payer Information</b>				
(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) <b>Live Sports Radio, LLC</b>			(3) TOTAL AMOUNT PAID (dollars and cents) <b>\$170.00</b>	
(4) STREET ADDRESS LINE NO. 1 <b>1300 N 17th Street</b>				
(5) STREET ADDRESS LINE NO. 2 <b>11th Floor</b>				
(6) CITY <b>Arlington</b>			(7) STATE <b>VA</b>	(8) ZIP CODE <b>22209</b>
(9) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) <b>703-8120432</b>			(10) COUNTRY CODE (IF NOT IN U.S.A.) <b>US</b>	
<b>FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED</b>				
(11) PAYER (FRN) <b>0017507716</b>			(12) FCC USE ONLY	
IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C)				
(13) APPLICANT NAME <b>Live Sports Radio, LLC</b>				
(14) STREET ADDRESS LINE NO. 1 <b>1300 N 17th Street</b>				
(15) STREET ADDRESS LINE NO. 2 <b>11th Floor</b>				
(16) CITY <b>Arlington</b>			(17) STATE <b>VA</b>	(18) ZIP CODE <b>22209</b>
(19) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) <b>703-8120432</b>			(20) COUNTRY CODE (IF NOT IN U.S.A.) <b>US</b>	
<b>FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED</b>				
(21) APPLICANT (FRN) <b>0017507716</b>			(22) FCC USE ONLY	
<b>COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET</b>				
(23A) FCC Call Sign/Other ID <b>New</b>		(24A) Payment Type Code(PTC) <b>MGL</b>		(25A) Quantity <b>1</b>
(26A) Fee Due for (PTC) <b>\$170.00</b>		(27A) Total Fee <b>\$170.00</b>		FCC Use Only
(28A) FCC CODE 1 <b>Lemont, IL</b>			(29A) FCC CODE 2 <b>Channel 5</b>	
(23B) FCC Call Sign/Other ID		(24B) Payment Type Code(PTC)		(25B) Quantity
(26B) Fee Due for (PTC)		(27B) Total Fee		FCC Use Only
(28B) FCC CODE 1			(29B) FCC CODE 2	