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August 1, 2018

VIA HAND DELIVERY

Marlene H. Dortch, Secretary Federal Communications Commission 445 12th Street, SW Washington, DC 20554

Attn: Audio Division, Media Bureau

Accepted / Filed

AUG - 1 2018

Federal Communications Commission Office of the Secretary

Re: Truth Broadcasting Corporation

WPOL (AM), Winston-Salem, NC (Facility ID 72970)
WSMX (AM), Winston-Salem, NC (Facility ID 24682)
FCC Form 302-AM Direct Measurement Applications

Dear Ms. Dortch:

Transmitted herewith, in triplicate, are applications for Direct Measurement of Power on FCC Form 302-AM for the above-referenced stations. There are no filing fees associated with the applications.

Please date-stamp the extra copy of this submission, and return it to us in the enclosed self-addressed stamped envelope. Should you have any questions with respect to this matter, please feel free to contact the undersigned at (703) 812-0458.

Respectfully submitted,

Davina S. Sashkin

Counsel for

Truth Broadcasting Corporation

Accepted / Filed

Federal Communications Commission Washington, D. C. 20554 Approved by OMB 3060-0627 Expires 01/31/98

FOR FCC USE ONLY AUG - 1 2018

Federal Communications Commission Office of the Secretary

FCC 302-AM APPLICATION FOR AM BROADCAST STATION LICENSE

(Please read instructions before filling out form.

FOR COMMISSION USE ONLY	
FILE NO.BZ-2018096 ACA	

SECTION I - APPLICANT FEE INFORMATION						
PAYOR NAME (Last, First, Middle Initial)						
TRUTH BROADCASTING CORPORATION						
MAILING ADDRESS (Line 1) (Maximum 35 characters) 4405 PROVIDENCE LANE						
MAILING ADDRESS (Line 2) (Maximum 35 characters) SUITE D						
CITY WINSTON-SALEM	STATE OR COUNTRY (if for NC	reign address)	ZIP CODE 27106			
TELEPHONE NUMBER (include area code) 336-759-0363	CALL LETTERS WSMX	OTHER FCC IDE	OTHER FCC IDENTIFIER (If applicable)			
2. A. Is a fee submitted with this application?			Yes ✓ No			
B. If No, indicate reason for fee exemption (see 47 C.F.R. Section						
Governmental Entity Noncommercial educational licensee APPICATION FOR DIRECT MEASUREMENT						
Enter in Column (A) the correct Fee Type Code for the service you are applying for. Fee Type Codes may be found in the "Mass Media Services Fee Filing Guide." Column (B) lists the Fee Multiple applicable for this application. Enter fee amount due in Column (C).						
(A) (B)	(C)					
FEE TYPE FEE MULTIPLE	FEE DUE FOR FEE TYPE CODE IN COLUMN (A)		FOR FCC USE ONLY			
0 0 1	\$					
To be used only when you are requesting concurrent actions which res	sult in a requirement to list mor	e than one Fee Typ	e Code.			
(A) (B) (B)	(C)		FOR FCC USE ONLY			
			14			
ADD ALL AMOUNTS SHOWN IN COLUMN C, AND ENTER THE TOTAL HERE. THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED	TOTAL AMOUNT REMITTED WITH TH APPLICATION	IS	FOR FCC USE ONLY			
REMITTANCE.						

,	SECTION II - APPLICAN 1. NAME OF APPLICANT TRUTH BROADCASTING						
MAILING ADDRESS 4405 PROVIDENCE LANE, SUITE D							_
CITY WINSTON-SALEM				STATE NC		ZIP CODE 27106	
	2. This application is for:	Commercial AM Direc	tional	Noncomm	nercial Ion-Directional		
	Call letters Community of License Construction Permit File No. Modification of Construction Permit File No. Permit File No(s).				Expiration Date of Last Construction Permit		
	WSMX	WINSTON-SALEM			1 cmilt lie 140(3).	Construction 1 errint	
	3. Is the station no accordance with 47 C.F. If No, explain in an Exhi		to auto	matic program	test authority in	✓ Yes No Exhibit No.	
	4. Have all the terms construction permit been	s, conditions, and obligant of the state of	ations s	et forth in the	above described	✓ Yes No Exhibit No.	
	If No, state exceptions in	n an Exhibit.					
	5. Apart from the changes already reported, has any cause or circumstance arisen since the grant of the underlying construction permit which would result in any statement or representation contained in the construction permit application to be now incorrect?						
	If Yes, explain in an Exhibit.						
6. Has the permittee filed its Ownership Report (FCC Form 323) or ownership certification in accordance with 47 C.F.R. Section 73.3615(b)?					Yes No Does not apply		
If No, explain in an Exhibit.					Exhibit No.		
	7. Has an adverse finding been made or an adverse final action been taken by any court or administrative body with respect to the applicant or parties to the application in a civil or criminal proceeding, brought under the provisions of any law relating to the following: any felony; mass media related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination?						
If the answer is Yes, attach as an Exhibit a full disclosure of the persons and matters involved, including an identification of the court or administrative body and the proceeding (by dates and file numbers), and the disposition of the litigation. Where the requisite information has been earlier disclosed in connection with another application or as required by 47 U.S.C. Section 1.65(c), the applicant need only provide: (i) an identification of that previous submission by reference to the file number in the case of an application, the call letters of the station regarding which the application or Section 1.65 information was filed, and the date of filing; and (ii) the disposition of the previously reported matter.					Exhibit No.		

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						
CERTIFIC	CATION					
1. 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).						
2. 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 STUART W. EPPERSON, JR.	Signature					
STUART W. EFFERSON, JR.	X	T				
PRESIDENT	Date	Telephone Number				
WILLFUL FALSE STATEMENTS ON THIS FORM AR	E PUNISHABLE BY FIN	E AND/OR IMPRISONMENT				

√ 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

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 Applicant							
Truth Broadcasting Corporation							
PURPOSE OF A	UTHORIZATI	ON APPLIED FOR	: (check one)				
	Station License						
1		truction permit Fa		1			
Call Sign File No. of Construction Permit Frequency Hours of Operation N/CN/Y (if applicable) Hours of Operation Hours of					ration	Power in kilowatts	
WSMX (if applicable) (kHz) 1500				Da	ay.	Night:	Day 0.14
2. Station location							
North Carolina			City or Town Winston-Salem				
3. Transmitter lo	cation						
State	County			City or Town		Street address	
NC	Forsyth			Winston-	Salem	(or other identific 93 Salem \	/alley Road
4. Main studio lo	cation						
State	County			City or Town		Street address	ation)
NC	Forsyth			Winston-Salem		(or other identification) 4405 Providence Lane	
5. Remote contro	ol point locatio	n (specify only if at	thorized direction	nal antenna)			
State County			City or Town		Street address (or other identification)		
6. Has type-approved stereo generating equipment been installed? 7. Does the sampling system meet the requirements of 47 C.F.R. Section 73.68? Yes No Not Applicable Attach as an Exhibit a detailed description of the sampling system as installed. Exhibit No.							
RF common point or antenna current (in amperes) without modulation for night system N/A RF common point or antenna current (in amperes) without modulation for day system 1.46							
operating frequency Night Day Ni 65.24				Measured antenna or common point reactance (in ohms) at operating frequency. Night Day +j98.5			
Antenna indication	ns for direction	nal operation Antenna	monitor	Antenna mo	mitor cample	1	
Towers Phase reading(Night			Antenna monitor sample current ratio(s) Night Day		Antenna base currents		
		Night Day			Night	Day	
Manufacturer and type of antenna monitor:							

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.) If antenna is either top Overall height in meters Overall height in meters of Overall height in meters Type Radiator loaded or sectionalized, radiator above base above ground (include above ground (without describe fully in an obstruction lighting) insulator, or above base, if obstruction lighting) Exhibit. arounded. insulated, vertical Exhibit No. 117.3 116.4 115.8 N/A guyed tower Series Shunt Excitation Geographic coordinates to nearest second. For directional antenna give coordinates of center of array. For single vertical radiator give tower location. 80.0 19 " 36° 26 " West Longitude 15 ' North Latitude 04 ' If not fully described above, attach as an Exhibit further details and dimensions including any other Exhibit No. N/A antenna mounted on tower and associated isolation circuits. Also, if necessary for a complete description, attach as an Exhibit a sketch of the details and Exhibit No. N/A dimensions of ground system. 10. In what respect, if any, does the apparatus constructed differ from that described in the application for construction permit or in the permit? None 11. Give reasons for the change in antenna or common point resistance. Replaced an FM translator antenna. I certify that I represent the applicant in the capacity indicated below and that I have examined the foregoing statement of technical information and that it is true to the best of my knowledge and belief. Signature (check appropriate box bell Name (Please Print or Type) Cynthia M. Jacobson EXNTHIA MARIE **JACOBSON** Date Address (include ZIP Code) Lic. No. 027914 July 31, 2018 Carl T. Jones Corporation 7901 Yarnwood Court Telephone No. (Include Area Code) (703) 569-7704 Springfield, VA 22153 Registered Professional Engineer **Technical Director Technical Consultant** Chief Operator

FCC 302-AM (Page 5) August 1995

Other (specify)



STATEMENT OF CYNTHIA M. JACOBSON, P.E. IN SUPPORT OF AN APPLICATION FOR DIRECT MEASURE OF POWER WSMX - WINSTON-SALEM, NORTH CAROLINA 1500 kHz - 0.14 kW DAY - ND Facility ID: 24682

Licensee: Truth Broadcasting Corporation

I am an employee of the firm of Carl T. Jones Corporation, with offices located in Springfield, Virginia. My education and experience are a matter of record with the Federal Communications Commission. I am a Registered Professional Engineer in the Commonwealth of Virginia, Registration No. 027914.

Radio Station WSMX, Winston-Salem, North Carolina, licensed to Truth Broadcasting Corporation, operates on 1500 kHz with a power of 0.14 kW daytime only using a non-directional antenna. WSMX is co-located with Station WPOL, also licensed to Truth Broadcasting Corporation, operating on 1340 kHz with a power of 1.0 kW on an unlimited time basis using a non-directional antenna. The existing FM translator antenna on the tower has been replaced with a combined antenna system¹ and thus the slight shift in the WSMX antenna impedance.

After the completion of the installation of the FM translator antenna replacement, the impedance of the tower at each station frequency was measured using an Array

¹ W235CY (File No. BMPFT-20180427AAG) and W278BM (File No. BPFT-20180427AAH).

STATEMENT OF CYNTHIA M. JACOBSON, P.E. WSMX – WINSTON-SALEM, NORTH CAROLINA PAGE 2

Solutions Power AIM 120 VNA. The WSMX impedance at the point of measurement was 65.24 + j98.5. The WSMX transmitter was then adjusted to produce a current of 1.46 amperes at the point of power determination, producing the authorized input power level of 0.14 kilowatts.

It is submitted that WSMX is ready to return to normal operation and determine power by the direct method. Further, WSMX should be issued a modified license reflecting the changes set forth in the attached FCC Form 302-AM.

This statement was prepared by me or under my direct supervision and the information contained herein is believed to be true and correct.

DATED: July 31, 2018

CYNTHIA MARIE Z JACOBSON D Lic. No. 027914

email: info@ctjc.com