

FEB 15 2019

US BANK/FCC

ORIGINAL  
190219 9089 900 001

READ INSTRUCTIONS CAREFULLY  
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION  
REMITTANCE ADVICE  
FORM 159

Approved by OMB  
3060-0589  
Page No. 1 of 1

(1) LOCKBOX# <b>979089</b> <i>879089</i>	SPECIAL USE ONLY
	FCC USE ONLY

SECTION A - PAYER INFORMATION

(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card) <b>DENNIS J. KELLY</b>		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) <b>\$1,560.00</b>
(4) STREET ADDRESS LINE NO. 1 <b>9318 FAIRVIEW AVENUE</b>		
(5) STREET ADDRESS LINE NO. 2		
(6) CITY <b>MANASSAS</b>	(7) STATE <b>VA</b>	(8) ZIP CODE <b>20110</b>
(9) DAYTIME TELEPHONE NUMBER (include area code) <b>2022932300</b>	(10) COUNTRY CODE (if not in U.S.A.)	

FCC REGISTRATION NUMBER (FRN) REQUIRED

(11) PAYER (FRN) <b>0004927901</b>	(12) FCC USE ONLY
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IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C)  
COMPLETE SECTION BELOW FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET

(13) APPLICANT NAME <b>BUSTOS MEDIA HOLDINGS, LLC</b>		
(14) STREET ADDRESS LINE NO. 1 <b>5110 S.E. STARK STREET</b>		
(15) STREET ADDRESS LINE NO. 2		
(16) CITY <b>PORTLAND</b>	(17) STATE <b>OR</b>	(18) ZIP CODE <b>97215</b>
(19) DAYTIME TELEPHONE NUMBER (include area code) <b>5032345550</b>	(20) COUNTRY CODE (if not in U.S.A.)	

FCC REGISTRATION NUMBER (FRN) REQUIRED

(21) APPLICANT (FRN) <b>0003745494</b>	(22) FCC USE ONLY
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COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET

(23A) CALL SIGN/OTHER ID <b>KMIA</b>	(24A) PAYMENT TYPE CODE <b>MMR</b>	(25A) QUANTITY <b>1</b>
(26A) FEE DUE FOR (PTC) <b>\$725.00</b>	(27A) TOTAL FEE <b>\$725.00</b>	FCC USE ONLY
(28A) FCC CODE 1 <b>33683</b>	(29A) FCC CODE 2	
(23B) CALL SIGN/OTHER ID <b>KMIA</b>	(24B) PAYMENT TYPE CODE <b>MOR</b>	(25B) QUANTITY <b>1</b>
(26B) FEE DUE FOR (PTC) <b>\$835.00</b>	(27B) TOTAL FEE <b>\$835.00</b>	FCC USE ONLY
(28B) FCC CODE 1 <b>33683</b>	(29B) FCC CODE 2	

SECTION D - CERTIFICATION

CERTIFICATION STATEMENT  
I, \_\_\_\_\_, certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information and belief.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SECTION E - CREDIT CARD PAYMENT INFORMATION

MASTERCARD \_\_\_\_\_ VISA \_\_\_\_\_ AMEX  DISCOVER

ACCOUNT NO

I hereby authorize

SIGNATURE \_\_\_\_\_

**PAID BY CREDIT CARD**

01210 INAL

Law Office of  
**DENNIS J. KELLY**  
Post Office Box 41177  
Washington, DC 20018

2019 FEB 26 PM 7:20

MEMBER, DISTRICT OF COLUMBIA BAR ONLY;  
PRACTICE LIMITED TO FEDERAL COURTS AND AGENCIES

TELEPHONE: 888-322-5291  
202-293-2300

TELECOPIER: 571-399-8036  
E-MAIL: dkellyfcclaw1@comcast.net

February 14, 2019

Federal Communications Commission  
Media Services  
Post Office Box 979089  
St. Louis, MO 63197-9000

Attention: Audio Division, Media Bureau

**RE: KMIA (AM), Auburn-Federal Way, WA**  
**FCC Facility ID #33683**  
**FRN#: 0003-7454-94**  
**FCC Form 302-AM Application for**  
**~~Direct Measurement of Power~~**

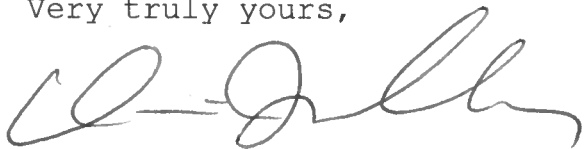
Dear Madame Secretary:

On behalf of our client Bustos Media Holdings, LLC, there is transmitted herewith in triplicate an application on FCC Form 302-AM for license to cover the facilities authorized in construction permit File No. BP-20141223ABK for existing AM Broadcast Station KMIA, Auburn-Federal Way, Washington.

This application includes an FCC Form 159 which provides credit card details to pay the required application filing fee of \$1,560.00.

Should additional information be desired in connection with the above matter, kindly communicate with this office.

Very truly yours,



Dennis J. Kelly

FOR  
FCC  
USE  
ONLY

**FCC 302-AM**  
**APPLICATION FOR AM**  
**BROADCAST STATION LICENSE**

(Please read instructions before filling out form.)

FOR COMMISSION USE ONLY

FILE NO.

*BL-20190215ABJ*

<b>SECTION I - APPLICANT FEE INFORMATION</b>			
1. PAYOR NAME (Last, First, Middle Initial)			
BUSTOS MEDIA HOLDINGS, LLC		FRN: 0003-7454-94	
MAILING ADDRESS (Line 1) (Maximum 35 characters)			
5110 S.E. STARK STREET			
MAILING ADDRESS (Line 2) (Maximum 35 characters)			
CITY	STATE OR COUNTRY (if foreign address)	ZIP CODE	
PORTLAND	OR	97215	
TELEPHONE NUMBER (include area code)	CALL LETTERS	OTHER FCC IDENTIFIER (If applicable)	
503-234-5550	KMIA	33683	
2. A. Is a fee submitted with this application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
B. If No, indicate reason for fee exemption (see 47 C.F.R. Section			
<input type="checkbox"/> Governmental Entity <input type="checkbox"/> Noncommercial educational licensee <input type="checkbox"/> Other (Please explain):			
C. If Yes, provide the following information:			
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 CODE	FEE MULTIPLE	FEE DUE FOR FEE TYPE CODE IN COLUMN (A)	FOR FCC USE ONLY
M M R	0 0 0 1	\$ 725.00	
To be used only when you are requesting concurrent actions which result in a requirement to list more than one Fee Type Code.			
(A)	(B)	(C)	
M O R	0 0 0 1	\$ 835.00	FOR 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	FOR FCC USE ONLY
		\$ 1,560.00	

<b>SECTION II - APPLICANT INFORMATION</b>		
1. NAME OF APPLICANT BUSTOS MEDIA HOLDINGS, LLC		
MAILING ADDRESS R5110 S.E. STARK STREET		
CITY Portland	STATE OR	ZIP CODE 97215

2. This application is for:

- Commercial       Noncommercial  
 AM Directional       AM Non-Directional  
**PROGRAM TEST AUTHORITY REQUESTED**

Call letters KMIA	Community of License Auburn-Federal Way, WA	Construction Permit File No. BP-20141223ABK	Modification of Construction Permit File No(s). n/a	Expiration Date of Last Construction Permit November 29, 2019
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3. Is the station now operating pursuant to automatic program test authority in accordance with 47 C.F.R. Section 73.1620?

**PROGRAM TEST AUTHORITY REQUESTED**

If No, explain in an Exhibit.

Yes  No

Exhibit No.  
Engineering

4. Have all the terms, conditions, and obligations set forth in the above described construction permit been fully met?

If No, state exceptions in an Exhibit.

Yes  No

Exhibit No.

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.

Yes  No

Exhibit No.

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)?

If No, explain in an Exhibit.

Yes  No

Does not apply

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.

Yes  No

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?

Yes  No

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

**CERTIFICATION**

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).

Yes  No

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 AMADOR S. BUSTOS	Signature <i>Amador S. Bustos</i>	
Title PRESIDENT/MANAGER	Date 1/31/2019	Telephone Number 503-234-5550

**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.

**SECTION III - LICENSE APPLICATION ENGINEERING DATA**

Name of Applicant

Bustos Media Holdings, LLC

PURPOSE OF AUTHORIZATION APPLIED FOR: (check one)

Station License

Direct Measurement of Power

**1. Facilities authorized in construction permit**

Call Sign	File No. of Construction Permit (if applicable)	Frequency (kHz)	Hours of Operation	Power in kilowatts	
				Night	Day
KMIA	BP-20141223ABK	1210	UNL	0.22	27.5

**2. Station location**

State Washington	City or Town Auburn-Federal Way
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**3. Transmitter location**

State WA	County King	City or Town Auburn	Street address (or other identification) 1408 W. Main
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**4. Main studio location**

State WA	County King	City or Town Kent	Street address (or other identification) 1004 W. James St.
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**5. Remote control point location (specify only if authorized directional antenna)**

State WA	County King	City or Town Kent	Street address (or other identification) 1004 W. James St.
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6. Has type-approved stereo generating equipment been installed?

Yes  No

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.

No change in data on file

**8. Operating constants:**

RF common point or antenna current (in amperes) without modulation for night system 2.1	RF common point or antenna current (in amperes) without modulation for day system 24
Measured antenna or common point resistance (in ohms) at operating frequency Night 50 Day 50	Measured antenna or common point reactance (in ohms) at operating frequency Night Day

**Antenna indications for directional operation**

Towers	Antenna monitor Phase reading(s) in degrees		Antenna monitor sample current ratio(s)		Antenna base currents	
	Night	Day	Night	Day	Night	Day
1	-116	-116	0.66	0.66		
2	0	0	1	1		

Manufacturer and type of antenna monitor:

Potomac Instruments AM 1901

**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.)

Type Radiator Uniform Cross-section guyed towers	Overall height in meters of radiator above base insulator, or above base, if grounded.  57.9	Overall height in meters above ground (without obstruction lighting)  #1 59.1 #2 59.2	Overall height in meters above ground (include obstruction lighting)  #1 59.1 #2 59.2	If antenna is either top loaded or sectionalized, describe fully in an Exhibit.  Exhibit No. N/A
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Excitation  Series  Shunt

Geographic coordinates to nearest second. For directional antenna give coordinates of center of array. For single vertical radiator give tower location.

North Latitude	47 <sup>o</sup>	18'	20"	West Longitude	122 <sup>o</sup>	14'	52"
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If not fully described above, attach as an Exhibit further details and dimensions including any other antenna mounted on tower and associated isolation circuits.

Exhibit No.

Also, if necessary for a complete description, attach as an Exhibit a sketch of the details and dimensions of ground system.


Exhibit No.  
No Change

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.

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.

Name (Please Print or Type) Thomas S. Gorton	Signature (check appropriate box below) 
Address (include ZIP Code) Hatfield & Dawson Consulting Engineers 9500 Greenwood Ave N Seattle, WA 98103-3012	Date January 31, 2019
	Telephone No. (Include Area Code) (206) 783-9151

- Technical Director
- Registered Professional Engineer
- Chief Operator
- Technical Consultant
- Other (specify)

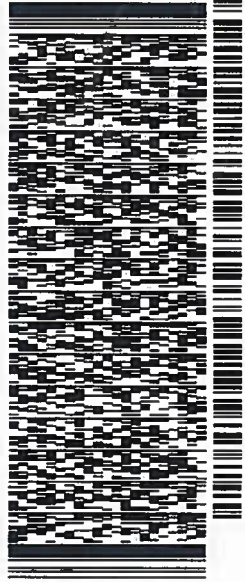
ORIGIN ID: CXXA (202) 293-2300  
DENNIS J. KELLY  
LAW OFFICE OF DENNIS J. KELLY  
9318 FAIRVIEW AVENUE  
MANASSAS, VA 20110  
UNITED STATES US

SHIP DATE: 14FEB19  
ACT WGT: 0.50 LB  
CAD: 4663705IN/ET 4100  
BILL SENDER

TO GOVERNMENT LOCKBOX 979089

US BANK  
1005 CONVENTION PLAZA  
SL-MO-C2-GL  
ST. LOUIS MO 63101  
(888) 225-5322  
REF: KMA  
DEPT.  
PO.

565.20E3D/23AD



TRK# 7744 7641 8180  
0201  
FRI - 15 FEB 3:00P  
STANDARD OVERNIGHT

XX CPSA  
63101  
STL  
MO-US



FEB 15 2019

US BANK/FCC 00303

**After printing this label:**

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

**Warning:** Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number.

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