TU387 DAVID TILLOTSON
Attorney at Law

Attorney at Law

2019 FEB 28 711 2 78

4606 Charleston Terrace, N.W. Washington, DC 20007-1911

Tel: (202) 625-6241 Email dtlaw67@starpower.net

February 20, 2019

Marlene Dortch, Secretary Federal Communications Commission The Portals, 445 Twelfth Street, S.W. TW-A325 Washington, D.C. 20554

Received & Inspected

FEB 2 82019

FCC Mailroom

RE: Station KBKW, Aberdeen, WA

Dear Ms. Dortch:

Submitted herewith in triplicate, on behalf of Jodesha Broadcasting, Inc. is an application on FCC Form 302-AM to complete the process of correcting the station's coordinates. .

If you have any questions concerning this application, please call me or send me an email.

Sincerely,

David Tillotson

Dand allsts-

Attorney for Jodesha Broadcasting, Inc.

000498758 BP 20171227AAE

Federal Communications Commission Washington, D. C. 20554

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

FOR FCC USE ONLY	
ONLY	

FCC 302-AM APPLICATION FOR AM BROADCAST STATION LICENSE

(Please read instructions before filling out form.

	COMMISSION USE ONLY		
FILE	NO. BL-2019	0228	ABL

SECTION I - APPLICANT FEE INFORMATION		
PAYOR NAME (Last. First, Middle Initial)		
JODESHA BROADCASTING, INC.		
MAILING ADDRESS (Line 1) (Maximum 35 characters) PO BOX 1198		
MAILING ADDRESS (Line 2) (Maximum 35 characters) 1520 SIMPSON AVE		
CITY ABERDEEN	STATE OR COUNTRY (if foreign address) WA	ZIP CODE 98520
TELEPHONE NUMBER (include area code) 360-532-1456	CALL LETTERS OTHER FCC	DENTIFIER (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 educ	cational licensee	
C. If Yes, provide the following information:	CORRECTION PR	ROCESS
Enter in Column (A) the correct Fee Type Code for the service you Fee Filing Guide." Column (B) lists the Fee Multiple applicable for the (A) (B) FEE TYPE CODE	(C) FEE DUE FOR FEE TYPE CODE IN COLUMN (A)	nd in the "Mass Media Services a (C). FOR FCC USE ONLY
0 0 0 1	\$	
To be used only when you are requesting concurrent actions which re	sult in a requirement to list more than one Fee	Type Code.
(A) (B) (D) 0 0 1	(C)	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

SECTION II - APPLICA	NT INFORMATION			
NAME OF APPLICANT JODESHA BROADCASTII				
MAILING ADDRESS	•			,
CITY		STATE WA		ZIP CODE 98520
2. This application is fo	Commercia	T. Honour	nmercial Non-Directional	
Call letters KBKW	Community of License ABERDEEN	Construction Permit File No BP-20171227AAE	Modification of Construction Permit File No(s).	Expiration Date of Last Construction Permit MAY 3, 2021
	F.R. Section 73.1620?	nt to automatic progran	n test authority in	Yes No Exhibit No.
construction permit be	en fully met?	oligations set forth in the	e above described	Yes No
If No, state exceptions 5. Apart from the cha		has any cause or circum	stance arisen since	
the grant of the under	erlying construction peri	mit which would result in ermit application to be no	n any statement or	Yes V No
If Yes, explain in an E	xhibit.			Exhibit No.
	filed its Ownership Reponnce with 47 C.F.R. Sect	ort (FCC Form 323) or ow tion 73.3615(b)?	nership	✓ Yes No Does not apply
If No, explain in an Ex	hibit.			Exhibit No.
or administrative body criminal proceeding, b felony; mass media	with respect to the app rought under the provisi	adverse final action been licant or parties to the aptions of any law relating to fair competition; fraudu	plication in a civil or the following: any	Yes ✓ No
involved, including an (by dates and file nu- information has beer required by 47 U.S.C. of that previous subm the call letters of the	identification of the coumbers), and the disposing earlier disclosed in Section 1.65(c), the application by reference to the station regarding which	full disclosure of the pert or administrative body ition of the litigation. Viconnection with another plicant need only provide: the file number in the case the application or Section position of the previously	and the proceeding Where the requisite application or as (i) an identification se of an application, on 1.65 information	Exhibit No.

8. Does the applicant, or any party to the application, I the expanded band (1605-1705 kHz) or a permit or lice expanded band that is held in combination (pursuant to with the AM facility proposed to be modified herein?	ense either in the existing band or	Yes / No
If Yes, provide particulars as an Exhibit.		Exhibit No.
The APPLICANT hereby waives any claim to the use of against the regulatory power of the United States be requests and authorization in accordance with this appliamended).	ecause use of the same, whether by	license or otherwise, and
The APPLICANT acknowledges that all the statement material representations and that all the exhibits are a n	s made in this application and attach naterial part hereof and are incorporate	ned exhibits are considered and herein as set out in full in
CEF	RTIFICATION	
1. By checking Yes, the applicant certifies, that, in the or she is not subject to a denial of federal benefits that to Section 5301 of the Anti-Drug Abuse Act of 1988, case of a non-individual applicant (e.g., corporation, passociation), no party to the application is subject to includes FCC benefits pursuant to that section. For the purposes, see 47 C.F.R. Section 1.2002(b).	at includes FCC benefits pursuant 21 U.S.C. Section 862, or, in the artnership or other unincorporated a denial of federal benefits that	✓ Yes No
2. I certify that the statements in this application are true and are made in good faith.	ue, complete, and correct to the best o	f my knowledge and belief,
WILLIAM J. WOLFENBARGER	Signature William William	defention
PRESIDENT	5000	none Number
WWW 1 - 110 - 241 - 271		

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.

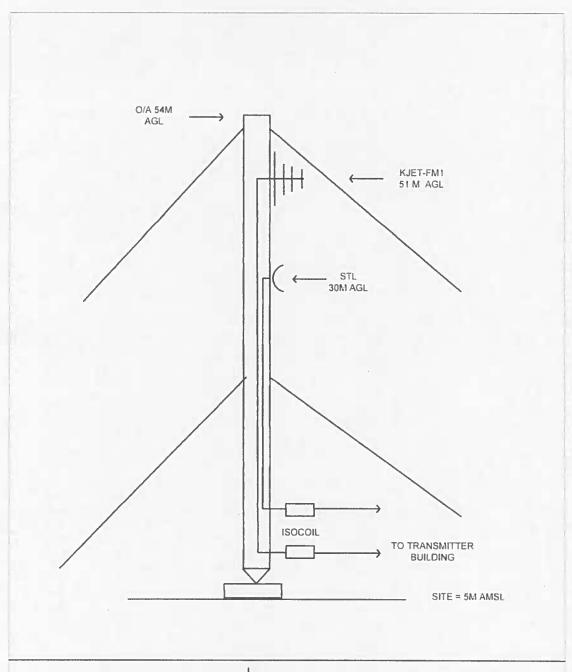
PURPOSE O	F AUTHORIZATIO	N APPLIED FO	R: (check one)				
			[(Circon circ)				
	Station License		Direct Me	asurement of Power			
1. Facilities a	authorized in consti	ruction permit					
Call Sign		enstruction Permi	it Frequency	Hours of Operation		Power	in kilowatts
KBKW	(if applicable) BP-20171227/		(kHz) 1450 KHZ	Unlimited	1	light 1.0	Day 1.0
2. Station loc	ation						
State				City or Town			
Washington			Aberdeen				
3. Transmitte	er location						
State	County			City or Town		Street address	
WA	Grays H	arbor		Aberdeen	(or other identil Westport Roa	
1. Main studi		,		7.150.10011		westport Roa	u
4. Main studi State	County			City or Town	5	Street address	
WA	Grays Ha	erhor		Aberdeen	(or other identi	
						1520 Simpson /	lve
	ontrol point location	n (specify only if	authorized direction			Street address	
State	County						
	approved stereo ge					or other identi	Yes V
7. Does the s	approved stereo ge sampling system m	eet the requirem	ents of 47 C.F.R.	? Section 73.68?		or other identii	Yes No
7. Does the s Attach as a	approved stereo ge sampling system m n Exhibit a detailed constants:	eet the requirem	nents of 47 C.F.R.	? Section 73.68? m as installed.		or other identii	Yes Not Applicable whibit No.
7. Does the s Attach as a	approved stereo ge sampling system m	eet the requirem	nents of 47 C.F.R.	? Section 73.68?	antenna cu	or other identii	Yes N Yes N Not Applicable
Attach as an	approved stereo gesampling system man Exhibit a detailed constants: point or antenna cur night system	description of the	nents of 47 C.F.R. ne sampling system s) without	? Section 73.68? m as installed. RF common point or modulation for day sy	antenna cu	or other identii	Yes No Not Applicable whibit No.
Attach as an Attac	approved stereo gesampling system man Exhibit a detailed constants: point or antenna cur night system	d description of the surrent (in ampere point resistance (Day 81.6 all operation	ne sampling systems) without	RF common point or modulation for day sy 3.5 Measured antenna or operating frequency Night	antenna cu ristem	or other identii	Yes No Not Applicable whibit No.
Attach as an Attac	approved stereo gesampling system man Exhibit a detailed constants: constants: coint or antenna cur night system tenna or common puency	d description of the surrent (in ampere point resistance (Day 81.6 all operation Antenna	ne sampling systems) without (in ohms) at	RF common point or modulation for day sy 3.5 Measured antenna or operating frequency Night Antenna monitor sa	antenna curstem	or other identii	Yes No Yes No Not Applicable Anibit No. Peres) without e (in ohms) at
Attach as an Attac	approved stereo gesampling system man Exhibit a detailed constants: point or antenna cur night system	description of the description o	ne sampling systems) without (in ohms) at a monitor g(s) in degrees	RF common point or modulation for day sy 3.5 Measured antenna or operating frequency Night Antenna monitor se current ratio(s	antenna cu estem	or other identification of the identificatio	Yes No Yes No Not Applicable whibit No. eres) without e (in ohms) at
Attach as an Attac	approved stereo gesampling system man Exhibit a detailed constants: constants: coint or antenna cur night system tenna or common puency	d description of the surrent (in ampere point resistance (Day 81.6 all operation Antenna	ne sampling systems) without (in ohms) at	RF common point or modulation for day sy 3.5 Measured antenna or operating frequency Night Antenna monitor se current ratio(s	antenna curstem	or other identii	Yes No Yes No Not Applicable Anibit No. Peres) without e (in ohms) at
Attach as an Attac	approved stereo gesampling system man Exhibit a detailed constants: constants: coint or antenna cur night system tenna or common puency	description of the description o	ne sampling systems) without (in ohms) at a monitor g(s) in degrees	RF common point or modulation for day sy 3.5 Measured antenna or operating frequency Night Antenna monitor se current ratio(s	antenna cu estem	or other identification of the identificatio	Yes N Yes N Not Applicable without the (in ohms) at a base currents
Attach as an Attac	approved stereo gesampling system man Exhibit a detailed constants: constants: coint or antenna cur night system tenna or common puency	description of the description o	ne sampling systems) without (in ohms) at a monitor g(s) in degrees	RF common point or modulation for day sy 3.5 Measured antenna or operating frequency Night Antenna monitor se current ratio(s	antenna cu estem	or other identification of the identificatio	Yes Not Applicable whibit No.
Attach as an Attac	approved stereo gesampling system man Exhibit a detailed constants: constants: coint or antenna cur night system tenna or common puency	description of the description o	ne sampling systems) without (in ohms) at a monitor g(s) in degrees	RF common point or modulation for day sy 3.5 Measured antenna or operating frequency Night Antenna monitor se current ratio(s	antenna cu estem	or other identification of the identificatio	Yes N Yes N Not Applicable without res) without reside (in ohms) at a base currents

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.)	

	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.
vertical guyed tower	51.8 m	53.6 m	53.6 m	Exhibit No.
Excitation	Series	Shunt		
Geographic coordinates tower location.	to nearest second. For direct	ional antenna give coordina	ites of center of array. For sir	ngle vertical radiator give
North Latitude 46	° 56 ' 55	5 " West Longit	^{ude} 123 ° 49	12 "
antenna mounted on tow Also, if necessary for a	ove, attach as an Exhibit furth ver and associated Isolation ci-	rcuits.		A Exhibit No.
dimensions of ground system. 10. In what respect, if arpermit?	ny, does the apparatus constr	ucted differ from that descri	ibed in the application for con	struction permit or in the
	change in antenna or commo	n point resistance.		
certify that I represent	f FIVI translator anto the applicant in the capacity	indicated below and that I		g statement of technical
certify that I represent to information and that it is to Name (Please Print or Ty	the applicant in the capacity rue to the best of my knowled pe)	indicated below and that I ge and belief.		g statement of technical
certify that I represent to information and that it is to Name (Please Print or Ty Erik C. Swanson, Address (include ZIP Cod	the applicant in the capacity true to the best of my knowled (pe) P.E.	indicated below and that I ge and bellef. Signature (che	have examined the foregoing	g statement of technical
certify that I represent to information and that it is to lame (Please Print or Ty Erik C. Swanson, address (include ZIP Cod	the applicant in the capacity true to the best of my knowled (pe) P.E. te) n Consulting Enginee Ave N	indicated below and that I ge and belief. Signature (che Date Novemb	have examined the foregoing teck appropriate box below) er 12, 2018 (Include Area Code)	g statement of technical
certify that I represent to information and that it is to lame (Please Print or Ty Erik C. Swanson, address (include ZIP Cod Hatfield & Dawson 9500 Greenwood	the applicant in the capacity true to the best of my knowled (pe) P.E. te) n Consulting Enginee Ave N	sindicated below and that I ge and belief. Signature (che Date Novemb Telephone No. 206-783	have examined the foregoing teck appropriate box below) er 12, 2018 (Include Area Code)	g statement of technical
certify that I represent to a represent the formation and that it is to lame (Please Print or Ty Erik C. Swanson, address (include ZIP Code Hatfield & Dawson Geattle, WA 9810	the applicant in the capacity true to the best of my knowled (pe) P.E. te) n Consulting Enginee Ave N	indicated below and that I ge and belief. Signature (che Date Novemb Telephone No. 206-783	have examined the foregoing ack appropriate box hatow) er 12, 2018 (Include Area Ccde) -9151	g statement of technical

FCC 302-AM (Page 5) August 1995



HATFIELD & DAWSON CONSULTING ENGINEERS KBKW (AM) ABERDEEN
TOWER SKETCH
E. SWANSON 11/2018