



# Federal Communications Commission

## PERMITTEE INITIAL REQUEST FORM

FILE NUMBER	20131114AXW	FACILITY ID	196931	SERVICE	FL
PERMITTEE NAME	RURAL FELICITY				
MAILING ADDRESS	811 E. WASHINGTON ST				
CONTINUED ADDRESS					
CITY	KIRKSVILLE	STATE	MO	ZIP	63501-3180
REQUESTED CALL SIGN	KRFR-LP	SERVICE	FL	EFFECTIVE DATE	02/06/2014

The applicant submitting this request is authorized to certify that neither the licensee nor any shareholder, officer, or director thereof, is subject to a denial of federal benefits, including FCC benefits, pursuant to section 5301 of the ANTI-DRUG ABUSE ACT of 1988, 21 U.S.C. section 853(a).

## APPLICANT/REPRESENTATIVE

NAME	JOHN B. SHEWMAKER				
<input type="checkbox"/> Check here if applicant address is same as permittee (if you don't want to fill in below).					
ORGANIZATION	Rural Felicity				
STREET ADDRESS	8820 S. KARI LN				
CONTINUED ADDRESS					
CITY	COLUMBIA	STATE	MO	ZIP	65201-9368
PHONE	573	442	4119	E-MAIL ADDRESS	jbsheemaker@bonnefemme.org
FRN:	0023126477	PASSWORD:	.....		

SUBMIT REQUEST

RESET

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