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BEFORE THE FEDERAL COMMUNICATIONS COMMISSION

PETITION TO DENY LICENSE RENEWAL FOR

WYQQ CHARLTON, MASS FACILITY ID #4102 AND

WLCQ-LP FEEDING HILLS, MASS FACILITY # 133854

Now comes Jayson Fredette 1440 Russell Rd Westfield, Mass. 01071-0292

to state as follows: **A.** Standing: I live in the listening area of WLCQ in Feeding Hills, Ma. and when I travel, as well as others on Interstate 90, (The Mass. Pike) We can hear WYCC Charlton for over 30 miles.

**B.** I come now to state that there has been filed in both license renewal lies and deceit as follow: The FCC has stated that owners of low power FM Stations such as WLCP cannot have person and persons of the same family co owning or serving on boards of both low power and high power FM stations.

We come to state that this is happening and it has been hidden from the FCC by both licensees. First Richard E Dunn who lives at 3 Hunter Ridge Circle in Southwick, Mass is Pastor of Lighthouse Christian Center a Church located at 522 Springfield St Feeding Hills, Mass and applied for and filed the license application for WLCP. Annette Dunn who lives at 3 Hunter Ridge Circle Southwick, Mass. She is Richard's wife and serves as Director and Treasurer of Lighthouse Christian Center licensee of WLCQ as stated in Corporation Records (Copies Enclosed as Exhibit A) also see Filings of forms 318,319 and the latest license renewal form 303 just filed.

**C.** Now let's look at WYQQ ownership both State and FCC records show the licensee Epic light Network and it President James R Dunn at 3 Hunter Ridge Road in Southwick, Mass. (Exhibit B). In talking with people who attend Lighthouse Christian Center, James is the son of Richard and Annette Dunn.

No where in any of the FCC filling are either Richard Dunn and Annette Dunn ever listed as Husband and Wife, nor is James listed as a son. Yet look at applications filed with the FCC and they lived back in 2001 together in W Springfield. Also in

other searches they and James are listed as living together both in Mass. and South Carolina.

**D.** It is requested that an issue of Lack of Candor and Fraud should be issued against the board of directors of both companies. As they are the licensees of these two radio stations. It is also requested that Character Issues be raised against the Dunn's and that a hearing on the merits be held on these matters.

The facts stated in this complaint and in the Exhibits are true to the best of my knowledge.

Sincerely,

A handwritten signature in black ink, appearing to read "Jayson Fredette", with a long, sweeping horizontal stroke at the end.

Jayson Fredette

c/o 1440 Russell Rd. Westfield Mass 01071-0292

Federal Communications Commission Washington, D.C. 20554  <p style="text-align: center;"><b>FCC 323-E</b></p>	Approved by OMB 3060-0084 (June 2002)	FOR FCC USE ONLY  FOR COMMISSION USE ONLY FILE NO. BOA - 20131121AIR
<p><b>Ownership Report For Noncommercial Educational Broadcast Station</b></p> <p>Read INSTRUCTIONS Before Filling Out Form</p>		

**Section I - General**

1.	Legal Name of the Licensee/Permittee EPIC LIGHT NETWORK, INC.		
	Mailing Address 3 HUNTERS RIDGE ROAD		
	City SOUTHWICK	State or Country (if foreign address) MA	ZIP Code 01077 -
	Telephone Number (include area code) 4134333383	E-Mail Address (if available)	
	FCC Registration Number: 0021946918	Call Sign WYQQ	Facility ID Number 4102
2.	Contact Representative (if other than Licensee/Permittee) DAVID A. O'CONNOR		
	Firm or Company Name WILKINSON BARKER KNAUER, LLP		
	Mailing Address 2300 N STREET, NW SUITE 700		
	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20037 -
	Telephone Number (include area code) 2027834141	E-Mail Address (if available) DOCONNOR@WBKLAW.COM	
3.	Name of entity, if other than licensee or permittee, for which report is filed		
	Mailing Address		
	City	State or Country (if foreign address)	ZIP Code
	Telephone Number (include area code)	E-Mail Address (if available)	

**Section II - Ownership Information**

4.	All of the information furnished in this Report is accurate as of 11/06/2013 (Date must comply with 47 C.F.R. Section 73.3615(d), i.e., information must be current within 60 days of filing of this report, when 4(a) below is checked.)		
	This Report is filed for (check one)		
	a. <input checked="" type="checkbox"/> Biennial	b. <input type="checkbox"/> Transfer of Control or Assignment of License/Permit	c. <input type="checkbox"/> Other
	d. <input type="checkbox"/> Amendment to pending application		

for the following stations:

[Enter Station Information]

**Station List**

This Report is filed for the following stations:

Call Letters	Facility ID Number	Location (City/State)	Class of service
WYQQ	4102	CHARLTON MA	FM

5. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

[Enter Contract/Instrument Information]

**Contracts/Instruments Information**

List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject shall respond.)

Description of Contract or Instrument	Name of person or organization with whom contract is made	Date of Execution (mm/dd/yyyy)	Date of Expiration (mm/dd/yyyy)
ARTICLES OF ORGANIZATION	MASSACHUSETTS	07/16/2012	

Description of Contract or Instrument	Name of person or organization with whom contract is made	Date of Execution (mm/dd/yyyy)	Date of Expiration (mm/dd/yyyy)
BYLAWS	MASSACHUSETTS	07/16/2012	

6. Is the governing board directly or indirectly under the control of another entity?  Yes  No  
 If Yes, is a separate FCC Form 323-E submitted for such entity?  Yes  No

7. List officers, members of governing board, and holders of 1% or more ownership interest, if any. Use one column for each individual or entity. Attach supplemental pages, if necessary.

[Enter Owner Information]

**Owner Information**

List officers, members of governing board, and holders of 1% or more ownership interest, if any. Use one column for each individual or entity. Attach supplemental pages if necessary.

**(Read carefully - The numbered items below refer to line numbers in the following table.)**

- a. Name and address of officer, member of governing board, and holders of 1% or more ownership interest (if other than individual also show name, address and citizenship of natural person authorized to vote the interest). List officers first, then board members, and thereafter, holders of 1% or more ownership interest, if any.
- b. Citizenship.
- c. Office held.
- d. Percent of interest held.

- e. Principal profession or occupation.
- f. By whom appointed or elected.
- g. Existing interests in any other broadcast station, including the nature and size of such interests.

a. Name and Address.	JAMES R. DUNN, 3 HUNTERS RIDGE ROAD, SOUTHWICK, MA 01077
b. Citizenship.	US
c. Office held.	PRESIDENT & DIRECTOR
d. Percent of interest held.	33.33
e. Principal profession or occupation.	RELIGIOUS EDUCATION
f. By whom appointed or elected.	BOARD
g. Existing interests	NONE

a. Name and Address.	TIM MOEN, 19 STEWART LANE, AGAWAM, MA 01001
b. Citizenship.	US
c. Office held.	CLERK & DIRECTOR
d. Percent of interest held.	33.33
e. Principal profession or occupation.	RELIGIOUS EDUCATION
f. By whom appointed or elected.	BOARD
g. Existing interests	NONE

a. Name and Address.	LARRY WHITE, 88 LISWELL DRIVE, FEEDING HILLS, MA 01030
b. Citizenship.	US
c. Office held.	TREASURER & DIRECTOR
d. Percent of interest held.	33.33
e. Principal profession or occupation.	RELIGIOUS EDUCATION
f. By whom appointed or elected.	BOARD
g. Existing interests	NONE

**SECTION III - CERTIFICATION**

I certify that I am PRESIDENT

(Official Title)

of EPIC LIGHT NETWORK, INC.

(Exact legal title or name of respondent)

and that I have examined this Report and that to the best of my knowledge and belief, all statements in this Report are true, correct and complete.

(Date of certification must be within 60 days of the date shown in Question 4, Section II and in no event prior to that date.)

Signature JAMES R. DUNN	Date 11/21/2013
Telephone Number of Respondent (Include area code) 4134333383	

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).

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**Exhibits**

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the application satisfies each of the pertinent standards and criteria set forth in the application, instructions, and worksheets.

2. **Eligibility.** Each applicant must answer "Yes" to one and "No" to two of the three following certifications. An applicant should **not** submit an explanatory exhibit in connection with these Question 2 "No" responses.

The applicant certifies that:

a. it is a nonprofit educational organization; or

Yes  No

b. it is a Tribe or Tribal organization; or

Yes  No

c. it is a state or local government or a non-government entity that proposes a noncommercial public safety radio service to protect the safety of life, health, or property.

Yes  No

If the answer to 2c is "Yes" and the applicant is submitting multiple applications, is this application the "priority" application? *See Creation of a Low Power Radio Service, Memorandum Opinion and Order on Reconsideration, 15 FCC Rcd 19208, 19239-40, 79-80 (2000).*

Yes  No  
 N/A

Note: An applicant that answers "Yes" to 2a. must include an exhibit that describes the applicant's educational program and how its proposed station will be used to advance its educational program. If the applicant is incorporated, the exhibit must include the state and date of applicant's incorporation. If the applicant is unincorporated, the exhibit must include the state in which it is registered or otherwise recognized and the date of such registration or recognition.

[Exhibit 2]

An applicant answering "Yes" to 2b. must include an exhibit that specifies whether the applicant is a Tribe or Tribal organization, and describes its proposed noncommercial service. If the applicant is a Tribal organization and is incorporated, the exhibit also must state which Tribe or Tribes own or control the applicant, and specify the state and date of applicant's incorporation. If the applicant is a Tribal organization and is not incorporated, the exhibit must state which Tribe or Tribes own or control the applicant, and specify the state in which the applicant is registered or otherwise recognized and the date of such registration or recognition.

An applicant that answers "Yes" to 2c. must include an exhibit that describes the applicant's public safety radio program and how the proposed station will be used to protect the safety of life, health or property. If the applicant is a non-governmental entity and is incorporated, the exhibit must include the state and date of applicant's incorporation. If the applicant is a non-governmental entity and is not incorporated, the exhibit must include the state in which it is registered or otherwise recognized and the date of such registration or recognition.

3. **Parties to the Application.**

a. List separately each party to the application including, as applicable, the applicant, its officers, directors, five percent or greater stockholders, non-insulated partners, members, and all other persons and entities with attributable interests. If a corporation or partnership holds an attributable interest in the applicant, list separately, as applicable, its officers, directors, five percent or greater stockholders, non-insulated partners, and board members. Create a separate row for each individual or entity. Attach additional pages if necessary.

(1) Name and address of party.

(2) Citizenship.

(3) Positional Interest: Officer, director, general partner, limited partner, LLC member, or investor/creditor attributable under the Commission's **equity/debt plus** standard.

(4) Percentage of votes.

(5) Percentage of total assets (equity plus debt).

[Enter Parties/Owners Information]

**Parties to the Application**

List separately each party to the application including, as applicable, the applicant, its officers, directors, five percent or greater stockholders, non-insulated partners, members, and all other persons and entities with attributable interests. If a corporation or partnership holds an attributable interest in the applicant, list separately, as applicable, its officers, directors, five percent or greater stockholders, non-insulated partners, and board members. Create a separate row for each individual or entity. Attach additional pages if necessary.



Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0938 (August 2000)	FOR FCC USE ONLY
<b>FCC 319</b>		
<b>APPLICATION FOR A LOW POWER FM                  BROADCAST STATION LICENSE</b>		FOR COMMISSION USE ONLY FILE NO. BLL - 20061106AAA
Read INSTRUCTIONS Before Filling Out Form		

**Section I - General Information**

1. Legal Name of the Applicant  
 LIGHTHOUSE CHRISTIAN CENTER

Mailing Address  
 522 SPRINGFIELD STREET

City: FEEDING HILLS      State or Country (if foreign address): MA      ZIP Code: 01030 -

Telephone Number (include area code): 4134333383      E-Mail Address (if available): DUNN@FIREOFGOD.COM

FCC Registration Number:      Call Sign: WLCQ-LP      Facility ID Number: 133854

2. Contact Representative (if other than Applicant)  
 JOHN O. BROOMALL, SR.

Telephone Number (include area code): 6788800676      Firm or Company Name: CHRISTIAN COMMUNITY BROADCASTERS

E-Mail Address (if available): JOHNBROOMALL@YAHOO.COM

3. **Station Location:**

City FEEDING HILLS	State MA
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4. **Program Test Authority (check one)**

Application for license to cover construction permit for LPFM subject to successive license term restrictions (47 C.F.R. Section 73.872(d)). Complete Sections II, III, and VI.  
 Stations subject to successive license term restrictions are not eligible for the automatic program test provisions of 47 C.F.R. Section 73.1620(a)(5). Such stations may commence program test operations only upon the receipt of written notification from the Commission.  
 List construction permit numbers and facility IDs for all facilities involved in the applicant's successive license term authorization.

Permit Number	Facility ID

Application for license to cover construction permit for LPFM station subject to special operating conditions that restrict program test authority. Complete Sections II, III, and VI.

Applicants with construction permits that include program test authority conditions, other than those that relate to successive license term conditions, may commence program test operations only upon the receipt of written notification from the Commission.	
<input checked="" type="checkbox"/>	Stations operating pursuant to automatic program test authority.
<b>5. Purpose of Application:</b>	
<input checked="" type="checkbox"/>	Application for license to cover construction permit for LPFM station. <b>Complete Sections II, III, and VI.</b>
<input type="checkbox"/>	Application for modification of transmission parameters of licensed facility (47 C.F.R. Section 73.875(c)). <b>Complete Sections II, IV, and VI.</b>
<input type="checkbox"/>	Application for modification of hours of operation for licensed facility pursuant to changes in a time-share agreement (47 C.F.R. Section 73.875(e)). <b>Complete Sections II, and V.</b>
<input type="checkbox"/>	Amendment to a pending license application If an amendment, <b>submit as an Exhibit</b> a listing by section and question number the portions of [Exhibit 1] the pending application that are being revised.

**Section II - Legal**

1. <b>Certification.</b> Applicant certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Applicant further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions.	<input checked="" type="radio"/> Yes <input type="radio"/> No
2. <b>Changed Circumstances.</b> Applicant certifies that, apart from changes already reported, no cause or circumstance has arisen since the grant of the underlying construction permit which would result in any statement or representation contained in the construction permit application now being incorrect.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 2]
3. <b>Anti-Drug Abuse Act Certification.</b> Applicant certifies that neither applicant nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.	<input checked="" type="radio"/> Yes <input type="radio"/> No
The applicant certifies that the statements in this application are true, complete, and correct to the best of its knowledge and belief, and are made in good faith. The applicant acknowledges that all certifications and attached Exhibits are considered material representations. The applicant hereby waives any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)	
Typed or Printed Name of Person Signing RICHARD DUNN	Typed or Printed Title of Person Signing PASTOR/PRESIDENT
Signature	Date 11/04/2006

**Section III**

**APPLICATION TO COVER A CONSTRUCTION PERMIT.**

1. <b>Most recent construction permit file number</b> (starts with the prefix BNPL or BMPL).	BNPL-20010613AGT
2. <b>Constructed Facility.</b> The facility was constructed as authorized in the underlying construction permit.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 3]
3.	<input checked="" type="radio"/> Yes <input type="radio"/> No

<b>Special Operating Conditions.</b> The facility was constructed in compliance with all special operating conditions, terms, and obligations described in the construction permit.	See Explanation in [Exhibit 4]
4 Complete Section VI.	

**Section VI**

**ENGINEERING SPECIFICATIONS.**

Applicants must list technical specifications accurately. Contradictory data found elsewhere in this application will be disregarded. All items must be completed. The response "on file" is not acceptable.

**TECH BOX**

1. Effective Radiated Power: 100 watts								
2. Transmitter Power Output: 242 watts								
3. Antenna Data <table border="1" data-bbox="175 758 1055 829"> <tr> <th data-bbox="175 758 324 793">Manufacturer</th> <th data-bbox="324 758 402 793">Model</th> <th data-bbox="402 758 617 793">Number of Sections</th> <th data-bbox="617 758 1055 793">Spacing Between Sections (wavelength)</th> </tr> <tr> <td data-bbox="175 793 324 829">SCA</td> <td data-bbox="324 793 402 829">FMO</td> <td data-bbox="402 793 617 829">1</td> <td data-bbox="617 793 1055 829">0</td> </tr> </table>	Manufacturer	Model	Number of Sections	Spacing Between Sections (wavelength)	SCA	FMO	1	0
Manufacturer	Model	Number of Sections	Spacing Between Sections (wavelength)					
SCA	FMO	1	0					
4. <b>Transmitter Power Output.</b> The applicant certifies that the operating transmitter power output specified in question 2., above, produces the effective radiated power specified in question 1., above. <span style="float: right;"><input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 5]</span>								

**Exhibits**

Federal Communications Commission Washington, D.C. 20554  <p style="text-align: center;"><b>FCC 314</b></p>	Approved by OMB 3060-0031 (October 2012)  FOR FCC USE ONLY
<p><b>APPLICATION FOR CONSENT TO ASSIGNMENT OF BROADCAST STATION CONSTRUCTION PERMIT OR LICENSE</b></p> <p>Read INSTRUCTIONS Before Filling Out Form</p>	FOR COMMISSION USE ONLY FILE NO. BALED - 20120905AAG

**Section I - General Information**

1.	Legal Name of the Licensee/Permittee CHRISTIAN MIX RADIO, INC.	
	Mailing Address 29A TROLLEY CROSSING ROAD	
	City CHARLTON	State or Country (if foreign address) MA
	Zip Code 01507 - 1522	
	Telephone Number (include area code) 5082480049	E-Mail Address (if available)
	FCC Registration Number: 0008100299	Call Sign WYCM
		Facility ID Number 4102
2.	Contact Representative (if other than licensee/permittee) JORDAN HEERSINK	Firm or Company Name CHRISTIAN MIX RADIO, INC.
	Mailing Address 29A TROLLEY CROSSING ROAD	
	City CHARLTON	State or Country (if foreign address) MA
		ZIP Code 01507 -
	Telephone Number (include area code) 5082480049	E-Mail Address (if available)
3.	Legal Name of the Assignee EPIC LIGHT NETWORK, INC.	
	Mailing Address 3 HUNTER RIDGE ROAD	
	City SOUTHWICK	State or Country (if foreign address) MA
		ZIP Code 01077 -
	Telephone Number (include area code) 4134333383	E-Mail Address (if available)
4.	Contact Representative (if other than assignee) DAVID A. O'CONNOR	Firm or Company Name WILKINSON BARKER KNAUER, LLP
	Mailing Address 2300 N STREET, NW SUITE 700	
	City WASHINGTON	State or Country (if foreign address) DC
		Zip Code 20037 -
	Telephone Number (include area code) 2027834141	E-Mail Address (if available) DOCONNOR@WBKLAW.COM

<p>If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114):</p> <p> <input type="radio"/> Governmental Entity                   <input checked="" type="radio"/> Noncommercial Educational Licensee/Permittee                   <input type="radio"/> Other  <input type="radio"/> N/A (Fee Required)             </p>	
6.	<p><b>Purpose of Application:</b></p> <p> <input checked="" type="radio"/> Assignment of license  <input type="radio"/> Assignment of construction permit  <input type="radio"/> Amendment to pending application                 </p> <p>File number of pending application: -</p> <p>If an amendment, <b>submit as an Exhibit</b> a listing by Section and Question Number of the portions of the pending application that are being revised. [Exhibit 1]</p>
7.	<p>Were any of the authorizations that are the subject of this application obtained through the Commission's competitive bidding procedures (see 47 C.F.R. Sections 1.2111(a) and 73.5001)? <input checked="" type="radio"/> Yes <input type="radio"/> No [Exhibit 2]</p> <p>If yes, list pertinent authorizations in an Exhibit.</p>
8.	<p>a. Were any of the authorizations that are the subject of this application obtained through the Commission's point system for reserved channel noncommercial educational stations (see 47 C.F.R. Sections 73.7001 and 73.7003)? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>b. If yes to 8(a), have all such stations operated for at least 4 years with a minimum operating schedule since grant pursuant to the point system? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>If no, list pertinent authorizations in an Exhibit and include in the Exhibit a showing that the transaction is consistent with the holding period requirements of 47 C.F.R. Section 73.7005(a). [Exhibit 3]</p> <p>c. LPFM Licenses Only: Has the assignor held the station license and operated the station for at least three years? <input type="radio"/> Yes <input checked="" type="radio"/> No <input checked="" type="radio"/> N/A</p>
9.	<p>a. Were any of the authorizations that are the subject of this application obtained after award of a dispositive Section 307(b) preference using the Tribal Priority, through Threshold Qualifications procedures, or through the Tribal Priority as applied before the NCE fair distribution analysis set forth in 47 C.F.R. § 73.7002(b)? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>b. If yes to 9(a), have all such stations operated for at least 4 years with a minimum operating schedule since grant? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>c. If no to 9(b), do both the assignor/transferor and assignee/transferee qualify for the Tribal Priority in all respects? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>If no, list pertinent authorizations in an Exhibit and include in the Exhibit a showing that the transaction is consistent with the established Tribal Priority holding period restrictions, or that the policy should be waived. [Exhibit 4]</p>

**Section II - Assignor**

1.	<p><b>Certification.</b> Licensee/permittee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee further certifies that where it has made an affirmative certification below, this certification</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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	constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.											
2.	<p><b>Authorizations to be Assigned.</b> List the authorized stations and construction permits to be assigned. Provide the Facility Identification Number and the Call Sign, or the Facility Identification Number and the File Number of the Construction Permit, and the location, for each station to be assigned. Include main stations, FM and/or TV translator stations, LPTV stations, FM and/or TV booster stations.</p> <p>[Enter Station Information]</p> <p>List the authorized stations and construction permits to be assigned. Provide the Facility Identification Number and the Call Sign, or the Facility Identification Number and the File Number of the Construction Permit, and the location, for each station to be assigned. Include main stations, FM and/or TV translator stations, LPTV stations, FM and/or TV booster stations.</p> <table border="1"> <thead> <tr> <th>Facility ID Number</th> <th>Call Sign</th> <th>Construction Permit File Number</th> <th>City</th> <th>State</th> </tr> </thead> <tbody> <tr> <td>4102</td> <td>WYCM</td> <td>-</td> <td>CHARLTON</td> <td>MA</td> </tr> </tbody> </table>	Facility ID Number	Call Sign	Construction Permit File Number	City	State	4102	WYCM	-	CHARLTON	MA	
Facility ID Number	Call Sign	Construction Permit File Number	City	State								
4102	WYCM	-	CHARLTON	MA								
3.	<p><b>Agreements for Sale of Station.</b> Licensee/permittee certifies that:</p> <p>a. it has placed in its public inspection file(s) and submitted as an exhibit to this item copies of all agreements for the sale of the station(s);</p> <p>b. these documents embody the complete and final understanding between licensee/permittee and assignee; and</p> <p>c. these agreements comply fully with the Commission's rules and policies.</p> <p><b>Exhibit Required</b></p>	<input checked="" type="radio"/> Yes <input type="radio"/> No [Exhibit 5]										
4.	<p><b>Other Authorizations.</b> List call signs, locations and facility identifiers of all other broadcast stations in which licensee/permittee or any party to the application has an attributable interest.</p>	<input checked="" type="radio"/> N/A [Exhibit 6]										
5.	<p><b>Character Issues.</b> Licensee/permittee certifies that neither licensee/permittee nor any party to the application has or has had any interest in, or connection with:</p> <p>a. any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or any party to the application; or</p> <p>b. any pending broadcast application in which character issues have been raised.</p>	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 7]										
6.	<p><b>Adverse Findings.</b> Licensee/permittee certifies that, with respect to the licensee/permittee and each party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any law related to any of the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination.</p>	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 8]										
7.	<p><b>Local Public Notice.</b> Licensee/permittee certifies that it has or will comply with the public notice requirements of 47 C.F.R. Section 73.3580.</p>	<input type="radio"/> Yes <input type="radio"/> No										
8.	<p><b>Auction Authorization.</b> Licensee/permittee certifies that more than five years have passed since the issuance of the construction permit for the station being assigned, where that permit was acquired in an auction through the use of a bidding credit or other special measure.</p>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A See Explanation in [Exhibit 9]										
9.	<p><b>Anti-Drug Abuse Act Certification.</b> Licensee/permittee certifies that neither licensee/permittee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.</p>	<input type="radio"/> Yes <input type="radio"/> No										
10.		<input type="radio"/> Yes <input type="radio"/> No										

<p><b>Anti-Discrimination Certification.</b> Licensee/permittee certifies that neither licensee/permittee nor any party to the application have violated the Commission's prohibition against discrimination on the basis of race, color, religion, national origin or sex in the sale of commercially operated AM, FM, TV, Class A TV or international broadcast stations.</p>	<p><input checked="" type="radio"/> N/A</p> <p>See Explanation in [Exhibit 10]</p>
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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. I acknowledge that all certifications and attached Exhibits are considered material representations.

<p>Typed or Printed Name of Person Signing JORDAN HEERSINK</p>	<p>Typed or Printed Title of Person Signing CLERK</p>
<p>Signature</p>	<p>Date 09/05/2012</p>

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).

**Section III - Assignee**

<p>1.</p>	<p><b>Certification.</b> Assignee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Assignee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>2.</p>	<p>Assignee is:</p> <p><input type="radio"/> an individual      <input type="radio"/> a general partnership      <input type="radio"/> a for-profit corporation</p> <p><input checked="" type="radio"/> a limited partnership      <input checked="" type="radio"/> a not-for-profit corporation      <input type="radio"/> a limited liability company (LLC/LC)</p> <p><input type="radio"/> other</p> <p>a. If "other", describe nature of applicant in an Exhibit.</p> <p>b. Radio Station applicants only: If the station(s) being assigned is noncommercial educational or LPFM, the assignee certifies that the Commission had previously granted a broadcast application, identified here by file number, that found this assignee qualified as a noncommercial educational entity with a qualifying educational program, and that the assignee will use the station(s) to advance a program similar to that the Commission has found qualifying in the assignee's previous application.</p> <p>c. Radio Station applicants only: Proposed assignees of noncommercial educational or LPFM stations that answered "No" to Question 2(b) must include an exhibit that describes the assignee's educational objective and how the station will be used to advance an educational program that will further that objective according to 47 C.F.R. Section 73.503 (for radio applicants), 47 C.F.R. Section 853 (for LPFM applicants).</p>	<p>[Exhibit 11]</p> <p><input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A</p> <p>FCC File Number -</p> <p>[Exhibit 12]</p>
<p>3.</p>	<p><b>Agreements for Sale of Station.</b> Assignee certifies that:</p> <p>a. the written agreements in the licensee/permittee's public inspection file and submitted to the Commission embody the complete and final agreement for the sale of the station(s) which are to be assigned; and</p> <p>b. these agreements comply fully with the Commission's rules and policies.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>See Explanation in [Exhibit 13]</p>
<p>4.</p>	<p><b>Parties to the Application.</b></p>	

a. List the assignee, and, if other than a natural person, its officers, directors, stockholders with attributable interests, non-insulated partners and/or members. If a corporation or partnership holds an attributable interest in the assignee, list separately its officers, directors, stockholders with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity. Attach additional pages if necessary.

- (1) Name and address of the assignee and each party to the application holding an attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the assignee first, officers next, then directors and thereafter, remaining stockholders and other entities with attributable interests, and partners.
- (2) Citizenship.
- (3) Positional Interest: Officer, director, general partner, limited partner, LLC member, investor/creditor attributable under the Commission's **equity/debt plus** standard., etc.
- (4) Percentage of votes.
- (5) Percentage of total assets (debt plus equity).

[Enter Parties/Owners Information]

**4a. Parties to the Application**

List the assignee, and, if other than a natural person, its officers, directors, stockholders with attributable interests, non-insulated partners and/or members. If a corporation or partnership holds an attributable interest in the assignee, list separately its officers, directors, stockholders with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity.

- (1) Name and address of the assignee and each party to the application holding an attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the assignee first, officers next, then directors and, thereafter, remaining stockholders and other entities with attributable interests, and partners.
- (2) Citizenship.
- (3) Positional Interest: Officer, director, general partner, limited partner, LLC member, investor/creditor attributable under the Commission's **equity/debt plus** standard., etc.
- (4) Percentage of votes.
- (5) Percentage of total assets(debt plus equity).

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets (debt plus equity)
EPIC LIGHT NETWORK, INC., 3 HUNTER RIDGE ROAD, SOUTHWICK, MA 01077	US	ASSIGNEE	0	0

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets (debt plus equity)
JAMES R. DUNN, 3 HUNTER RIDGE ROAD, SOUTHWICK, MA 01077	US	PRESIDENT AND DIRECTOR	33.33	0

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets (debt plus equity)
TIM MOHEN, 19 STEWART LANE, AGAWAM, MA 01001	US	CLERK AND DIRECTOR	33.3	0

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets (debt plus equity)
LARRY WHITE, 88 LISWELL DRIVE, FEEDING HILLS, MA 01077	US	TREASURER AND DIRECTOR	33.3	0



	<b>All applicants:</b> If "Yes" to Item 6e A or B: Submit as an Exhibit a copy of the form of irrevocable trust agreement providing for the assignment of the station(s) to an Eligible Entity.	See Explanation in [Exhibit 21]
7.	<b>Character Issues.</b> Assignee certifies that neither assignee nor any party to the application has or has had any interest in, or connection with: a. any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or any party to the application; or b. any pending broadcast application in which character issues have been raised.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 22]
8.	<b>Adverse Findings.</b> Assignee certifies that, with respect to the assignee and each party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any law related to any of the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 23]
9.	<b>Alien Ownership and Control.</b> Assignee certifies that it complies with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 24]
10.	<b>Financial Qualifications.</b> Assignee certifies that sufficient net liquid assets are on hand or are available from committed sources to consummate the transaction and operate the station (s) for three months.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 25]
11.	<b>Program Service Certification.</b> Assignee certifies that it is cognizant of and will comply with its obligations as a Commission licensee to present a program service responsive to the issues of public concern facing the station's community of license and service area.	<input checked="" type="radio"/> Yes <input type="radio"/> No
12.	<b>Auction Authorization.</b> Assignee certifies that where less than five years have passed since the issuance of the construction permit and the permit had been acquired in an auction through the use of a bidding credit or other special measure, it would qualify for such credit or other special measure.	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A See Explanation in [Exhibit 26]
13.	<b>Anti-Drug Abuse Act Certification.</b> Assignee certifies that neither assignee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.	<input checked="" type="radio"/> Yes <input type="radio"/> No
14.	<b>Equal Employment Opportunity (EEO).</b> If the applicant proposes to employ five or more full-time employees, applicant certifies that it is filing simultaneously with this application a Model EEO Program Report on FCC Form 396-A.	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A

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. I acknowledge that all certifications and attached Exhibits are considered material representations. I hereby waive any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and request an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)

Typed or Printed Name of Person Signing JAMES R. DUNN	Typed or Printed Title of Person Signing PRESIDENT
Signature	Date 09/05/2012

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).

**Exhibits**

**Attachment 5**

Description
PURCHASE AND SALE AGREEMENT

**Exhibit 11**

**Description:** NCE ELIGIBILITY

ATTACHED IS AN EDUCATIONAL PURPOSE STATEMENT AND A COMPLETED SECTION II OF FCC FORM 340, ITEMS #1-5.

**Attachment 11**

Description
EDUCATIONAL PURPOSE STATEMENT
FCC FORM 340, SECTION II, #1-5

**Exhibit 13**

**Description:** AGREEMENT

PLEASE SEE EXHIBIT 5.

**Attachment 13**

**Exhibit 18**

**Description:** MULTIPLE OWNERSHIP COMPLIANCE

THIS APPLICATION IS FOR A RESERVED-BAND NONCOMMERCIAL RADIO STATION. PURSUANT TO SECTION 73.3555(F) OF THE FCC'S RULES, THE COMMISSION'S MULTIPLE OWNERSHIP AND CROSS-OWNERSHIP RULES OF 47 C.F.R. 73.3555(A) ARE INAPPLICABLE TO THIS APPLICATION.

**Attachment 18**

Federal Communications Commission Washington, D.C. 20554  <p style="text-align: center;"><b>FCC 314</b></p>	Approved by OMB 3060-0031 (October 2012)  FOR FCC USE ONLY
<p><b>APPLICATION FOR CONSENT TO ASSIGNMENT OF BROADCAST STATION CONSTRUCTION PERMIT OR LICENSE</b></p> <p>Read INSTRUCTIONS Before Filling Out Form</p>	FOR COMMISSION USE ONLY FILE NO. BALED - 20120905AAG

**Section I - General Information**

1.	Legal Name of the Licensee/Permittee CHRISTIAN MIX RADIO, INC.	
	Mailing Address 29A TROLLEY CROSSING ROAD	
	City CHARLTON	State or Country (if foreign address) MA
	Zip Code 01507 - 1522	
	Telephone Number (include area code) 5082480049	E-Mail Address (if available)
	FCC Registration Number: 0008100299	Call Sign WYCM
	Facility ID Number 4102	
2.	Contact Representative (if other than licensee/permittee) JORDAN HEERSINK	Firm or Company Name CHRISTIAN MIX RADIO, INC.
	Mailing Address 29A TROLLEY CROSSING ROAD	
	City CHARLTON	State or Country (if foreign address) MA
	ZIP Code 01507 -	
	Telephone Number (include area code) 5082480049	E-Mail Address (if available)
3.	Legal Name of the Assignee EPIC LIGHT NETWORK, INC.	
	Mailing Address 3 HUNTER RIDGE ROAD	
	City SOUTHWICK	State or Country (if foreign address) MA
	ZIP Code 01077 -	
	Telephone Number (include area code) 4134333383	E-Mail Address (if available)
4.	Contact Representative (if other than assignee) DAVID A. O'CONNOR	Firm or Company Name WILKINSON BARKER KNAUER, LLP
	Mailing Address 2300 N STREET, NW SUITE 700	
	City WASHINGTON	State or Country (if foreign address) DC
	Zip Code 20037 -	
	Telephone Number (include area code) 2027834141	E-Mail Address (if available) DOCONNOR@WBKLAW.COM

	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input checked="" type="radio"/> Noncommercial Educational Licensee/Permittee <input type="radio"/> Other <input type="radio"/> N/A (Fee Required)	
6.	<b>Purpose of Application:</b> <input checked="" type="radio"/> Assignment of license <input type="radio"/> Assignment of construction permit <input type="radio"/> Amendment to pending application File number of pending application: - If an amendment, <b>submit as an Exhibit</b> a listing by Section and Question Number of the portions of the pending application that are being revised.	[Exhibit 1]
7.	Were any of the authorizations that are the subject of this application obtained through the Commission's competitive bidding procedures (see 47 C.F.R. Sections 1.2111(a) and 73.5001)? If yes, list pertinent authorizations in an Exhibit.	<input type="radio"/> Yes <input checked="" type="radio"/> No [Exhibit 2]
8.	a. Were any of the authorizations that are the subject of this application obtained through the Commission's point system for reserved channel noncommercial educational stations (see 47 C.F.R. Sections 73.7001 and 73.7003)?  b. If yes to 8(a), have all such stations operated for at least 4 years with a minimum operating schedule since grant pursuant to the point system? If no, list pertinent authorizations in an Exhibit and include in the Exhibit a showing that the transaction is consistent with the holding period requirements of 47 C.F.R. Section 73.7005(a).  c. LPFM Licenses Only: Has the assignor held the station license and operated the station for at least three years?	a. <input type="radio"/> Yes <input checked="" type="radio"/> No  b. <input type="radio"/> Yes <input checked="" type="radio"/> No [Exhibit 3]  c. <input type="radio"/> Yes <input checked="" type="radio"/> No <input checked="" type="radio"/> N/A
9.	a. Were any of the authorizations that are the subject of this application obtained after award of a dispositive Section 307(b) preference using the Tribal Priority, through Threshold Qualifications procedures, or through the Tribal Priority as applied before the NCE fair distribution analysis set forth in 47 C.F.R. § 73.7002(b)?  b. If yes to 9(a), have all such stations operated for at least 4 years with a minimum operating schedule since grant?  c. If no to 9(b), do both the assignor/transferor and assignee/transferee qualify for the Tribal Priority in all respects?  If no, list pertinent authorizations in an Exhibit and include in the Exhibit a showing that the transaction is consistent with the established Tribal Priority holding period restrictions, or that the policy should be waived.	a. <input type="radio"/> Yes <input checked="" type="radio"/> No  b. <input type="radio"/> Yes <input checked="" type="radio"/> No  c. <input type="radio"/> Yes <input checked="" type="radio"/> No [Exhibit 4]

**Section II - Assignor**

1.	<b>Certification.</b> Licensee/permittee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee further certifies that where it has made an affirmative certification below, this certification	<input checked="" type="radio"/> Yes <input type="radio"/> No
----	--	---

	constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.											
2.	<p><b>Authorizations to be Assigned.</b> List the authorized stations and construction permits to be assigned. Provide the Facility Identification Number and the Call Sign, or the Facility Identification Number and the File Number of the Construction Permit, and the location, for each station to be assigned. Include main stations, FM and/or TV translator stations, LPTV stations, FM and/or TV booster stations.</p> <p>[Enter Station Information]</p> <p>List the authorized stations and construction permits to be assigned. Provide the Facility Identification Number and the Call Sign, or the Facility Identification Number and the File Number of the Construction Permit, and the location, for each station to be assigned. Include main stations, FM and/or TV translator stations, LPTV stations, FM and/or TV booster stations.</p> <table border="1"> <thead> <tr> <th>Facility ID Number</th> <th>Call Sign</th> <th>or Construction Permit File Number</th> <th>City</th> <th>State</th> </tr> </thead> <tbody> <tr> <td>4102</td> <td>WYCM</td> <td>-</td> <td>CHARLTON</td> <td>MA</td> </tr> </tbody> </table>	Facility ID Number	Call Sign	or Construction Permit File Number	City	State	4102	WYCM	-	CHARLTON	MA	
Facility ID Number	Call Sign	or Construction Permit File Number	City	State								
4102	WYCM	-	CHARLTON	MA								
3.	<p><b>Agreements for Sale of Station.</b> Licensee/permittee certifies that:</p> <p>a. it has placed in its public inspection file(s) and submitted as an exhibit to this item copies of all agreements for the sale of the station(s);</p> <p>b. these documents embody the complete and final understanding between licensee/permittee and assignee; and</p> <p>c. these agreements comply fully with the Commission's rules and policies.</p> <p><b>Exhibit Required</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No [Exhibit 5]</p>										
4.	<p><b>Other Authorizations.</b> List call signs, locations and facility identifiers of all other broadcast stations in which licensee/permittee or any party to the application has an attributable interest.</p>	<p><input checked="" type="radio"/> N/A [Exhibit 6]</p>										
5.	<p><b>Character Issues.</b> Licensee/permittee certifies that neither licensee/permittee nor any party to the application has or has had any interest in, or connection with:</p> <p>a. any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or any party to the application; or</p> <p>b. any pending broadcast application in which character issues have been raised.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 7]</p>										
6.	<p><b>Adverse Findings.</b> Licensee/permittee certifies that, with respect to the licensee/permittee and each party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any law related to any of the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 8]</p>										
7.	<p><b>Local Public Notice.</b> Licensee/permittee certifies that it has or will comply with the public notice requirements of 47 C.F.R. Section 73.3580.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>										
8.	<p><b>Auction Authorization.</b> Licensee/permittee certifies that more than five years have passed since the issuance of the construction permit for the station being assigned, where that permit was acquired in an auction through the use of a bidding credit or other special measure.</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A See Explanation in [Exhibit 9]</p>										
9.	<p><b>Anti-Drug Abuse Act Certification.</b> Licensee/permittee certifies that neither licensee/permittee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>										
10.		<p><input type="radio"/> Yes <input type="radio"/> No</p>										

<p><b>Anti-Discrimination Certification.</b> Licensee/permittee certifies that neither licensee/permittee nor any party to the application have violated the Commission's prohibition against discrimination on the basis of race, color, religion, national origin or sex in the sale of commercially operated AM, FM, TV, Class A TV or international broadcast stations.</p>	<p><input checked="" type="radio"/> N/A</p> <p>See Explanation in [Exhibit 10]</p>
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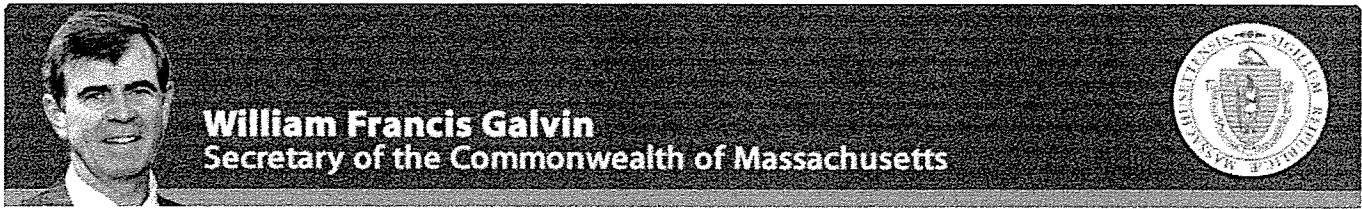
I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations.

<p>Typed or Printed Name of Person Signing JORDAN HEERSINK</p>	<p>Typed or Printed Title of Person Signing CLERK</p>
<p>Signature</p>	<p>Date 09/05/2012</p>

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**Section III - Assignee**

<p>1.</p>	<p><b>Certification.</b> Assignee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Assignee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>2.</p>	<p>Assignee is:</p> <p><input type="radio"/> an individual      <input type="radio"/> a general partnership      <input type="radio"/> a for-profit corporation</p> <p><input type="radio"/> a limited partnership      <input checked="" type="radio"/> a not-for-profit corporation      <input type="radio"/> a limited liability company (LLC/LC)</p> <p><input type="radio"/> other</p>	
	<p>a. If "other", describe nature of applicant in an Exhibit.</p>	<p>[Exhibit 11]</p>
	<p>b. Radio Station applicants only: If the station(s) being assigned is noncommercial educational or LPFM, the assignee certifies that the Commission had previously granted a broadcast application, identified here by file number, that found this assignee qualified as a noncommercial educational entity with a qualifying educational program, and that the assignee will use the station(s) to advance a program similar to that the Commission has found qualifying in the assignee's previous application.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p> <p><input checked="" type="radio"/> N/A</p> <p>FCC File Number -</p>
	<p>c. Radio Station applicants only: Proposed assignees of noncommercial educational or LPFM stations that aswered "No" to Question 2(b) must include an exhibit that describes the assignee's educational objective and how the station will be used to advance an educational program that will further that objective according to 47 C.F.R. Section 73.503 (for radio applicants), 47 C.F.R. Section 853 (for LPFM applicants).</p>	<p>[Exhibit 12]</p>
<p>3.</p>	<p><b>Agreements for Sale of Station.</b> Assignee certifies that:</p> <p>a. the written agreements in the licensee/permittee's public inspection file and submitted to the Commission embody the complete and final agreement for the sale of the station(s) which are to be assigned; and</p> <p>b. these agreements comply fully with the Commission's rules and policies.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>See Explanation in [Exhibit 13]</p>
<p>4.</p>	<p><b>Parties to the Application.</b></p>	



HOME DIRECTIONS CONTACT US

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## Corporations Division

### Business Entity results

Number of records: 131

Number of pages: 6

Name	Position	Individual's Address	Entity Name	ID No.	Old ID No.
DUNN, JAMES R.	SECRETARY	91 MARBLEHEAD ST.,N. ANDOVER, MA 01845 USA 91 MARBLEHEAD ST.,N. ANDOVER, MA 01845 USA	PULLET SURPRISE, INC.	043154521	000394774
DUNN , JAMES R.	DIRECTOR	3 HUNTERS RIDGE ROAD SOUTHWICK, MA 01077 USA 3 HUNTERS RIDGE ROAD SOUTHWICK, MA 01077 USA	EPIC LIGHT NETWORK, INC.	001083673	
DUNN , JAMES R.	PRESIDENT	3 HUNTERS RIDGE ROAD SOUTHWICK, MA 01077 USA 3 HUNTERS RIDGE ROAD SOUTHWICK, MA 01077 USA	EPIC LIGHT NETWORK, INC.	001083673	
DUNN , JAMES T	SOC SIGNATORY		MANET CONTRACTING, LLC	273150047	
DUNN , JAMES T.	SOC SIGNATORY		47 MANATEE LLC	001047190	
DUNN , JAMES T.	REAL PROPERTY		MANET CONTRACTING, LLC	273150047	
DUNN , JAMES T.	SOC SIGNATORY		THE BABCOCK GROUP, LLC	001056126	
DUNN , JAMES T.	REAL PROPERTY		THE BABCOCK GROUP, LLC	001056126	
DUNN , JAMES W.	MANAGER		STURBRIDGE CONSULTING, LLC	200678467	
DUNN , JAMES W.	SOC SIGNATORY		STURBRIDGE CONSULTING, LLC	200678467	
DUNN , JAMES W.	REAL PROPERTY		STURBRIDGE CONSULTING, LLC	200678467	
DUNNE , JAMES	TREASURER	371 WESTERN AVE. GLOUCESTER, MA 01930 USA	NORTHEAST PROFESSIONAL REGISTRY OF NURSES, INC.	201287349	000871027
DUNNE , JAMES	DIRECTOR	371 WESTERN AVE. GLOUCESTER, MA 01930 USA	NORTHEAST PROFESSIONAL REGISTRY OF NURSES, INC.	201287349	000871027
DUNNE , JAMES	PRESIDENT	371 WESTERN AVE. GLOUCESTER, MA 01930 USA	NORTHEAST SENIOR HEALTH CORPORATION	042731137	000104323
DUNNE , JAMES	DIRECTOR	371 WESTERN AVE. GLOUCESTER, MA 01930 USA	SEACOAST NURSING AND REHABILITATION CENTER, INC.	041305001	000354831
	PRESIDENT			043156492	

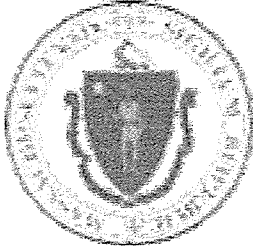
Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0031 (September 2004)	FOR FCC USE ONLY
<b>Consummation Notice</b>		FOR COMMISSION USE ONLY FILE NO.
Read Instructions/FAQ before filling out form		

**Section I - General Information**

1.	Legal Name of the Applicant EPIC LIGHT NETWORK, INC.										
	Mailing Address 3 HUNTERS RIDGE CIRCLE										
	City SOUTHWICK	State or Country (if foreign address) MA	Zip Code 01077 -								
	Telephone Number (include area code) 4134333383	E-Mail Address (if available)									
	FCC Registration Number: 0008100299	Call Sign WYQQ	Facility ID Number 4102								
2.	Contact Representative (if other than licensee/permittee) DAVID A. O'CONNOR	Firm or Company Name WILKINSON BARKER KNAUER, LLP									
	Mailing Address 2300 N STREET, NW SUITE 700										
	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20037 -								
	Telephone Number (include area code) 2027834141	E-Mail Address (if available) DOCONNOR@WBKLAW.COM									
3.	Purpose:										
	<input checked="" type="radio"/> Consummation Notice										
	<input type="radio"/> Extension of Consummation										
	<input type="radio"/> Notification of Non-consummation										
4.	Consummation for:										
	<input checked="" type="radio"/> Assignment of License and/or Permit										
	<input type="radio"/> Transfer of Control										
5.	Lead Station File Number: BALED - 20120905AAG	Lead Facility ID: 4102									
6.	<table border="1"> <thead> <tr> <th>File Number</th> <th>Facility ID</th> <th>Call Sign</th> <th>Will not Consummate</th> </tr> </thead> <tbody> <tr> <td>BALED-20120905AAG</td> <td>4102</td> <td>WYCM</td> <td><input type="checkbox"/></td> </tr> </tbody> </table>			File Number	Facility ID	Call Sign	Will not Consummate	BALED-20120905AAG	4102	WYCM	<input type="checkbox"/>
File Number	Facility ID	Call Sign	Will not Consummate								
BALED-20120905AAG	4102	WYCM	<input type="checkbox"/>								
7.	Date of consummation: 12/10/2012										
8.	FRN of Assignee/Transferee: 0021946918										

I hereby certify that the referenced assignment of license/transfer of control was consummated within the required time period, on the date indicated in #7 above.





**The Commonwealth of Massachusetts  
William Francis Galvin**

No Fee

Secretary of the Commonwealth, Corporations Division  
One Ashburton Place, 17th floor  
Boston, MA 02108-1512  
Telephone: (617) 727-9640

**Certificate of Change of Directors or Officers of Non-Profit Corporations**  
(General Laws, Chapter 180, Section 6D)

Federal Employer Identification Number: 000577830 (must be 9 digits)

I, GARY REIFF  Clerk  Assistant Clerk ,

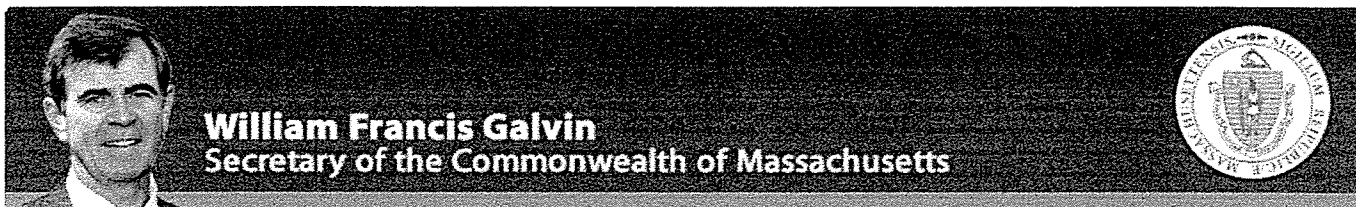
of LIGHTHOUSE CHRISTIAN CENTER, INC.

having a principal office at: 522 SPRINGFIELD ST. FEEDING HILLS, MA 01030 USA

certify that pursuant to General Laws, Chapter 180, Section 6D, a change in the directors and/or the president, treasurer and/or clerk of said corporation has been made and that the name, residential street address, and expiration of term of the president, treasurer, clerk and each director are as follows: (Please provide the name and residential street address of the assistant clerk if he/she is executing this certificate of change. Also, include the names of any additional officers of the corporation.)

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code	Expiration of Term
PRESIDENT	GARY REIFF	78 FREEMAN HALL RD. NOTTINGHAM, NH 03290 USA	
TREASURER	ANNETTE DUNN	3 HUNTERS RIDGE CIRCLE SOUTHWICK, MA 01077 USA	
CLERK	GARY REIFF	78 FREEMAN HALL RD. NOTTINGHAM, NH 03290 USA	
DIRECTOR	GARY REIFF	78 FREEMAN HALL RD. NOTTINGHAM, NH 03290 USA	
DIRECTOR	ANNETTE DUNN	3 HUNTERS RIDGE CIRCLE SOUTHWICK, MA 01077 USA	
DIRECTOR	ROBERT E. OLMSTEAD	7 BASSETT RD. HOLYOKE, MA 01040 USA	
DIRECTOR	MELISSA J. KNOT	1855 NORTHAMPTON ST. HOLYOKE, MA 01040 USA	

**SIGNED UNDER THE PENALTIES OF PERJURY, this 14 Day of September, 2013,  
GARY REIFF , Signature of Applicant.**



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## Corporations Division

### Business Entity Summary

ID Number: 000577830

Request certificate

New search

Summary for: LIGHTHOUSE CHRISTIAN CENTER, INC.

<b>The exact name of the Religious (Chapter 180):</b> LIGHTHOUSE CHRISTIAN CENTER, INC.			
<b>The name was changed from:</b> CROSSROADS CHRISTIAN FELLOWSHI on 03-26-2001			
<b>Entity type:</b> Religious (Chapter 180)			
<b>Identification Number:</b> 000577830		<b>Old ID Number:</b> 000000000	
<b>Date of Organization in Massachusetts:</b> 05-30-1997			
<b>Last date certain:</b>			
<b>Current Fiscal Month/Day:</b> 12/31		<b>Previous Fiscal Month/Day:</b> 12/31	
<b>The location of the Principal Office in Massachusetts:</b>			
Address: 522 SPRINGFIELD ST.			
City or town, State, Zip code, Country: FEEDING HILLS, MA 01030 USA			
<b>The name and address of the Resident Agent:</b>			
Name: VITTORIO COPPA			
Address: 1012 MEMORIAL AVE.			
City or town, State, Zip code, Country: W. SPRINGFIELD, MA 01089 USA			
<b>The Officers and Directors of the Corporation:</b>			
Title	Individual Name	Address	Term expires
PRESIDENT	GARY REIFF	78 FREEMAN HALL RD. NOTTINGHAM, NH 03290 USA	
TREASURER	ANNETTE DUNN	3 HUNTERS RIDGE CIRCLE SOUTHWICK, MA 01077 USA	
CLERK	GARY REIFF	78 FREEMAN HALL RD. NOTTINGHAM, NH 03290 USA	
DIRECTOR	GARY REIFF	78 FREEMAN HALL RD. NOTTINGHAM, NH 03290 USA	
DIRECTOR	ANNETTE DUNN	3 HUNTERS RIDGE CIRCLE SOUTHWICK, MA 01077 USA	
DIRECTOR	ROBERT E. OLMSTEAD	7 BASSETT RD. HOLYOKE, MA 01040 USA	
DIRECTOR	MELISSA J. KNOT	1855 NORTHAMPTON ST. HOLYOKE, MA 01040 USA	
<input type="checkbox"/> Consent <input type="checkbox"/> Confidential Data <input type="checkbox"/> Merger Allowed <input type="checkbox"/> Manufacturing			
<b>View filings for this business entity:</b>			
ALL FILINGS Annual Report Application For Revival Articles of Amendment Articles of Consolidation - Foreign and Domestic Articles of Consolidation - Domestic and Domestic			
View filings			

- (1) Name and address of party.
- (2) Citizenship.
- (3) Positional Interest: Officer, director, general partner, limited partner, LLC member, or investor/creditor attributable under the Commission's equity/debt plus standard.
- (4) Percentage of votes.
- (5) Percentage of total assets (equity plus debt).

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets
ANNETTE DUNN, 89 HUMPHREY LANE, WEST SPRINGFIELD, MA 01089	US	CLERK	33	0

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets
GARY REIFF, 72 ROCKY HILL ROAD, HADLEY, MA 01035	US	TREASURER	33	0

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets
RICHARD DUNN, 89 HUMPHREY LANE, W. SPRINGFIELD MA 01089	US	PRESIDENT	33	0

b. Applicant certifies that equity and financial interests not set forth above are non-attributable.

Yes  No  
 N/A

See Explanation in [Exhibit 3]

4. **Community-Based Criteria.** The applicant certifies that:

a. it is a nonprofit educational organization that is physically headquartered or has a campus within 16.1 kilometers (10 miles), if applicant is in the top 50 urban markets, or 32.1 kilometers (20 miles) if applicant is outside the top 50 urban markets, of the proposed transmitting antenna site specified in this application.	<input checked="" type="radio"/> Yes <input type="radio"/> No
b. it is a nonprofit educational organization that has 75 percent of its board members residing within 16.1 kilometers (10 miles), if applicant is in the top 50 urban markets, or 32.1 kilometers (20 miles) if applicant is outside the top 50 urban markets, of the proposed transmitting antenna site specified in this application.	<input type="radio"/> Yes <input checked="" type="radio"/> No
c. it is a Tribe and its Tribal Lands, as that term is defined in Section 73.7000 of the Commission's rules, are within the service area of the proposed LPFM station; or it is a Tribal organization owned or controlled by a Tribe (or Tribes) and such Tribe's (or Tribes') Tribal Lands, as that term is defined in Section 73.7000 of the Commission's rules, are within the service area of the proposed LPFM station. <i>See</i> 47 C.F.R. Sections 73.853(c) and 73.7000.	<input type="radio"/> Yes <input type="radio"/> No
d. it proposes a public safety radio service and has jurisdiction within the service area of the proposed LPFM station.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Note: An applicant should **not** submit an explanatory exhibit in connection with these Question 4 "No" responses.

5. **Ownership.**

a. Applicant certifies that it and all parties to the application comply with the multiple ownership limits set forth in Section 73.855 of the Commission's rules. <i>See</i> 47 C.F.R. Section 73.855.	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 4]
b. Applicant certifies that it and all parties to the application comply with the cross-ownership limits set forth in Section 73.860 of the Commission's rules. <i>See</i> 47 C.F.R. Section 73.860.	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 5]
c.	

000577830

# The Commonwealth of Massachusetts

William Francis Galvin  
Secretary of the Commonwealth

One Ashburton Place, Boston, Massachusetts 02108-1512

RECEIVED  
SEP 12 2013  
SECRETARY OF THE COMMONWEALTH  
CORPORATIONS DIVISION

## CERTIFICATE OF CHANGE OF DIRECTORS OR OFFICERS OF NON-PROFIT CORPORATIONS (General Laws, Chapter 180, Section 6D)

I, Gary Reiff, \*Clerk / \*Assistant Clerk

of Lighthouse Christian Center, Inc.  
(Exact name of corporation)

having a principal office at 522 Springfield Street, Feeding Hills, MA 01030  
(Street address of corporation in Massachusetts)

certify that pursuant to General Laws, Chapter 180, Section 6D, a change in the directors and/or the president, treasurer and/or clerk of said corporation has been made and that the name, residential address, and expiration of term of each director and the president, treasurer and clerk are as follows:

	NAME	RESIDENTIAL ADDRESS	EXPIRATION OF TERM OF OFFICE
President:	Gary Reiff	78 Freeman Hall Rd., Nottingham, MA 03290	
Treasurer:	Annette Dunn	3 Hunters Ridge Cir., Southwick, MA 01077	
Clerk:	Gary Reiff	78 Freeman Hall Rd., Nottingham, MA 03290	
**Assistant Clerk:			
Directors:	Gary Reiff	78 Freeman Hall Rd., Nottingham, MA 03290	
	Annette Dunn	3 Hunters Ridge Cir., Southwick, MA 01077	
	Robert E. Olmstead	7 Bassett Road, Holyoke, MA 01040	
	Melissa J. Knot	1855 Northampton, Holyoke, MA 01040	

SECRETARY OF THE COMMONWEALTH  
2013 SEP 12 PM 2:06  
CORPORATIONS DIVISION

SIGNED UNDER THE PENALTIES OF PERJURY, this 26 day of August, 20 13

[Signature], \*Clerk / \*Assistant Clerk.

\*Delete the inapplicable words.  
\*\*Please provide the name and residential address of the assistant clerk if he/she is executing this certificate of change.

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0110 (March 2011)	FOR FCC USE ONLY
<b>FCC 303-S</b>		
<b>APPLICATION FOR RENEWAL OF BROADCAST STATION LICENSE</b>		FOR COMMISSION USE ONLY FILE NO. <b>BRED - 20131121AIL</b>
Read INSTRUCTIONS Before Filling Out Form		

**Section I - General Information- TO BE COMPLETED BY ALL APPLICANTS**

1.	Legal Name of the Licensee EPIC LIGHT NETWORK, INC.  Mailing Address 3 HUNTERS RIDGE ROAD  <table style="width:100%;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State or Country (if foreign address)</td> <td style="width:34%;">ZIP Code</td> </tr> <tr> <td>SOUTHWICK</td> <td>MA</td> <td>01077 -</td> </tr> </table> <table style="width:100%;"> <tr> <td style="width:45%;">Telephone Number (include area code)</td> <td style="width:55%;">E-Mail Address (if available)</td> </tr> <tr> <td>4134333383</td> <td></td> </tr> </table> <table style="width:100%;"> <tr> <td style="width:45%;">FCC Registration Number:</td> <td style="width:25%;">Facility ID Number</td> <td style="width:30%;">Call Sign</td> </tr> <tr> <td>0021946918</td> <td>4102</td> <td>WYQQ</td> </tr> </table>	City	State or Country (if foreign address)	ZIP Code	SOUTHWICK	MA	01077 -	Telephone Number (include area code)	E-Mail Address (if available)	4134333383		FCC Registration Number:	Facility ID Number	Call Sign	0021946918	4102	WYQQ
City	State or Country (if foreign address)	ZIP Code															
SOUTHWICK	MA	01077 -															
Telephone Number (include area code)	E-Mail Address (if available)																
4134333383																	
FCC Registration Number:	Facility ID Number	Call Sign															
0021946918	4102	WYQQ															
2.	Contact Representative DAVID A. O'CONNOR  Mailing Address 2300 N STREET, NW SUITE 700  <table style="width:100%;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State or Country (if foreign address)</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20037 -</td> </tr> </table> <table style="width:100%;"> <tr> <td style="width:45%;">Telephone Number (include area code)</td> <td style="width:55%;">E-Mail Address (if available)</td> </tr> <tr> <td>2027834141</td> <td>DOCONNOR@WBKLAW.COM</td> </tr> </table>	City	State or Country (if foreign address)	Zip Code	WASHINGTON	DC	20037 -	Telephone Number (include area code)	E-Mail Address (if available)	2027834141	DOCONNOR@WBKLAW.COM						
City	State or Country (if foreign address)	Zip Code															
WASHINGTON	DC	20037 -															
Telephone Number (include area code)	E-Mail Address (if available)																
2027834141	DOCONNOR@WBKLAW.COM																
3.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input checked="" type="radio"/> Noncommercial Educational Licensee <input type="radio"/> Other <input type="radio"/> N/A (Fee Required)																
4.	<b>Purpose of Application</b>  <input checked="" type="radio"/> Renewal of license <input type="radio"/> Amendment to pending renewal application If an amendment, submit as an exhibit a listing by Section and Item Number the portions of [Exhibit 1] the pending application that are being revised.																
5.	<b>Facility Information:</b> <input type="radio"/> Commercial <input checked="" type="radio"/> Noncommercial Educational																
6.	<b>Service and Community of License</b> a. <input type="radio"/> AM <input checked="" type="radio"/> FM <input type="radio"/> FM Translator <input type="radio"/> LPFM <input type="radio"/> TV Translator <input type="radio"/> Low Power TV <input type="radio"/> Class A TV <input type="radio"/> Digital TV <input type="radio"/> Digital Translator or Digital LPTV <input type="radio"/> Digital Class A TV <table border="1" style="width:100%; margin-top: 5px;"> <tr> <td colspan="2" style="text-align: center;">Community of License /Area to be Served</td> </tr> <tr> <td style="width:50%;">City: CHARLTON</td> <td style="width:50%;">State : MA</td> </tr> </table>	Community of License /Area to be Served		City: CHARLTON	State : MA												
Community of License /Area to be Served																	
City: CHARLTON	State : MA																
b.	Does this application include one or more FM translator station(s), or TV translator station(s), LPTV station(s), in addition to the station listed in Section I question 1? (The callsign) <input type="radio"/> Yes <input checked="" type="radio"/> No																

	(s) of any associated FM translators, TV translators or LPTV stations will be requested in Section V).	
7.	<b>Other Authorizations.</b> List call signs, facility identifiers and location(s) of any FM booster or TV booster station(s) for which renewal of license is also requested. [Exhibit 2]	<input checked="" type="checkbox"/> N/A

**NOTE: In addition to the information called for in Sections II, III, IV and V, an explanatory exhibit providing full particulars must be submitted for each item for which a "No" response is provided.**

**Section II - Legal - TO BE COMPLETED BY ALL APPLICANTS**

1.	<b>Certification.</b> Licensee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application, instructions and worksheets.	<input checked="" type="radio"/> Yes <input type="radio"/> No
2.	<b>Character Issues.</b> Licensee certifies that the neither the licensee nor any party to the application has or has had any interest in, or connection with:	
	a. any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or party to the application; or	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 3]
	b. any pending broadcast application in which character issues have been raised.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 4]
3.	<b>Adverse Findings.</b> Licensee certifies that, with respect to the licensee and each party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any laws related to the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 5]
4.	<b>FCC Violations during the Preceding License Term.</b> Licensee certifies that, with respect to the station(s) for which renewal is requested, there have been no violations by the licensee of the Communications Act of 1934, as amended, or the rules or regulations of the Commission during the preceding license term. If No, the licensee must submit an explanatory exhibit providing complete descriptions of all violations.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 6]
5.	<b>Alien Ownership and Control.</b> Licensee certifies that it complies with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 7]
6.	<b>Anti-Drug Abuse Act Certification.</b> Licensee certifies that neither licensee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.	<input checked="" type="radio"/> Yes <input type="radio"/> No
7.	<b>Non-Discriminatory Advertising Sales Agreements.</b> Commercial licensee certifies that its advertising sales agreements do not discriminate on the basis of race or ethnicity and that all such agreements held by the licensee contain nondiscrimination clauses. Noncommercial licensees should select "not applicable."	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A See Explanation in [Exhibit 8]

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. I acknowledge that all certifications and attached Exhibits are considered material representations. I hereby waive any claim to the use of any particular frequency as against the regulatory power of the United States

because of the previous use of the same, whether by license or otherwise, and request an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)

Typed or Printed Name of Person Signing JAMES R. DUNN	Typed or Printed Title of Person Signing PRESIDENT
Signature	Date 11/21/2013

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).

**Section III - TO BE COMPLETED BY AM and FM LICENSEES ONLY**

1.	<b>Biennial Ownership Report:</b> Licensee certifies that the station's Biennial Ownership Report (FCC Form 323 or 323-E) has been filed with the Commission as required by 47 C.F.R. Section 73.3615.	<input checked="" type="radio"/> Yes <input type="radio"/> No  See Explanation in [Exhibit 9]
2.	<b>EEO Program:</b> Licensee certifies that:	
	a. The station's Broadcast EEO Program Report (FCC Form 396) has been filed with the Commission, as required by 47 C.F.R. Section 73.2080(f)(1).  Specify FCC Form 396 File Number : B396 - 20131121AJJ	<input checked="" type="radio"/> Yes <input type="radio"/> No  See Explanation in [Exhibit 10]
	b. The station has posted its most recent Broadcast EEO Public File Report on the station's website, as required by 47 C.F.R. Section 73.2080(c)(6).	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A  See Explanation in [Exhibit 11]
3.	<b>Local Public File.</b> Licensee certifies that the documentation, required by 47 C.F.R. Section 73.3526 or 73.3527, as applicable, has been placed in the station's public inspection file at the appropriate times.	<input checked="" type="radio"/> Yes <input type="radio"/> No  See Explanation in [Exhibit 12]
4.	<b>Adherence to Minimum Operating Schedule.</b> Licensee certifies that, during the preceding license term, the station has not been silent (or operating for less than its prescribed minimum operating hours) for any period of more than 30 days.  If No, submit an Exhibit specifying the exact dates in the preceding license term on which the station was silent or operating for less than its prescribed minimum hours.	<input checked="" type="radio"/> Yes <input type="radio"/> No  See Explanation in [Exhibit 13]
5.	<b>Discontinued Operations.</b> Licensee certifies that during the preceding license term, the station has not been silent for any consecutive 12-month period.	<input checked="" type="radio"/> Yes <input type="radio"/> No  See Explanation in [Exhibit 14]
6.	<b>Silent Station</b> Licensee certifies that the station is currently on the air broadcasting programming intended to be received by the public.	<input checked="" type="radio"/> Yes <input type="radio"/> No
7.	<b>Environmental Effects.</b> Licensee certifies that the specified facility complies with the maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments.  By checking "Yes" above, the licensee 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	<input checked="" type="radio"/> Yes <input type="radio"/> No  See Explanation in [Exhibit 15]

the site, tower, or antenna from radio frequency electromagnetic exposure in excess of FCC guidelines.		
8. <b>Radio/Newspaper Cross-Ownership.</b> Licensee certifies that neither the applicant nor any party to this application has an attributable interest in a newspaper which: (1) is published four or more days per week, (2) is in the dominant language in the market, and (3) is published in a community entirely encompassed by:		
a.	the 1 mV/m contour of one of the FM station(s)?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
b.	the 2 mV/m contour of one of the AM station(s)?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A
If No to either Question 8.a or 8.b, has the Commission made a finding pursuant to Section 310(d) of the Communications Act that the newspaper/broadcast combination is in the public interest?		<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 16]

**Exhibits**

**Exhibit 1**

**Description:** APPLICABLE DATES OF CERTIFICATION

APPLICANT CONSUMMATED THE ACQUISITION OF WYQQ(FM) ON DECEMBER 10, 2012. ACCORDINGLY, CERTIFICATIONS AND REPRESENTATIONS MADE HEREIN COVER THE PERIOD FROM DECEMBER 10, 2012 TO THE PRESENT.

**Attachment 1**



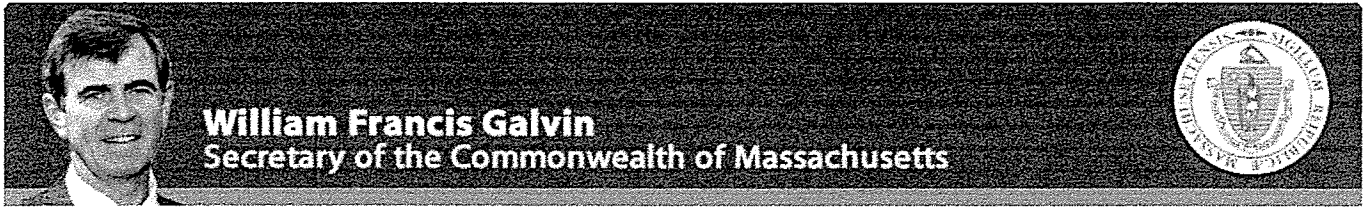
 <b>Federal Communications Commission</b>	
<b>Media Bureau</b>	<b>Call Sign Desk - Query</b>

Call Sign **WYQQ** is *not* available.

Call Sign	Service	Fac ID	City	State	Effective Date	Assigned To
<b>WYQQ</b>	FM	4102	CHARLTON	MA	10/20/2012	EPIC LIGHT NETWORK, INC.

Our records contain the following address(es) for above licensee(s):

<b>CALL SIGN</b>	WYQQ						
<b>LICENSEE</b>	EPIC LIGHT NETWORK, INC.						
<b>MAILING ADDRESS</b>	3 HUNTER RIDGE ROAD						
<b>CONTINUED ADDRESS</b>							
<b>CITY</b>	SOUTHWICK			<b>STATE</b>	MA	<b>ZIP</b>	01077-



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## Corporations Division

### Business Entity results

Number of records: 2

Print results

Name	Position	Individual's Address	Entity Name	ID No.	Old ID No.
DUNN , ANNETTE	TREASURER	3 HUNTERS RIDGE CIRCLE SOUTHWICK, MA 01077 USA	LIGHTHOUSE CHRISTIAN CENTER, INC.	000577830	000000000
DUNN , ANNETTE	DIRECTOR	3 HUNTERS RIDGE CIRCLE SOUTHWICK, MA 01077 USA	LIGHTHOUSE CHRISTIAN CENTER, INC.	000577830	000000000

New Search

William Francis Galvin, Secretary of the Commonwealth of Massachusetts

[Terms and Conditions](#)