unications Commission D. C. 20554

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

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FOR			
FOR FCC USE			
USE		·····	-
ONLY			

FCC 302-AM APPLICATION FOR AM BROADCAST STATION LICENSE

(Please read instructions before filling out form.

FOR COMMISSION	USE ONLY	
FILE NO.	ŧ	

	FILE NO.				
SECTION 1 - APPLICANT FEE INFORMATION					
PAYOR NAME (Last, First, Middle Initial)					
The Voice of Christian Evangelism	ı, Inc.				
MAILING ADDRESS (Line 1) (Maximum 35 characters) 605 State Street	Copy notices and	communications to			
MAILING ADDRESS (Line 2) (Maximum 35 characters)	Miller andd Suite 203 3750 Univ	Blvd., Kensington MD 208			
CITY El Centro	STATE OR COUNTRY (if foreign address) CA	ZIP CODE			
TELEPHONE NUMBER (include area code)		92243 CC IDENTIFIER (If applicable)			
2. A. Is a fee submitted with this application?B. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.11	FACID 8174	Yes No			
Governmental Entity Noncommercial educational licensee C. If Yes, provide the following information: Other (Please explain): NON FREABLE TO WRZECT WORD WATE)					
Enter in Column (A) the correct Fee Type Code for the service you are applying for. Fee Type Codes may be found in the "Mass Media Services Fee Filing Guide." Column (B) lists the Fee Multiple applicable for this application. Enter fee amount due in Column (C).					
(A) (B) FEE TYPE CODE FEE MULTIPLE 0 0 0 1	(C) FEE DUE FOR FEE TYPE CODE IN COLUMN (A)	FOR FCC USE ONLY			
To be used only when you are requesting concurrent actions which result in a requirement to list more than one Fee Type Code.					
(A) (B) (B) (D) (D) 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 - APPLICANT 1. NAME OF APPLICANT	INFORMATION					
The Voice of Christian Evangelism Inc. FDN 0005 0700 01						
MAILING ADDRESS 805 State Street						
El Centro .		STATE CA		ZIP CODE 92243		
2. This application is for:	Commercial AM Direction	Noncomi	mercial Non-Directional	72243		
Call letters KGBA FACID 8174	Community of License Cor Heber, CA	nstruction Permit File No.	Modification of Construction Permit File No(s).	Expiration Date of Last Construction Permit		
3. Is the station now op with 47 C.F.R. Section 73 If No, explain in an Exhib	APPLICATI	C program test autho UN TU CUR 1TE (LOOR DIA	RECT	Yes No Exhibit No.		
4. Have all the terms construction permit been	, conditions, and obligation fully met?	ns set forth in the	above described	Yes No		
If No, state exceptions in a	an Exhibit.			Exhibit No.		
5. Apart from the changes already reported, has any cause or circumstance arisen since the grant of the underlying construction which would result in any statement or representation contained in the construction permit application to be now incorrect? If Yes, explain in an Exhibit.						
6. Has the permittee filed its Ownership Report (FCC Form 323) or ownership certification in accordance with 47 C.F.R. Section 73.3615(b)?						
If No, explain in an Exhibit.						
7. Has an adverse finding been made or an adverse final action been taken by any court or administrative body with respect to the applicant or parties to the application in a civil or criminal proceeding, brought under the provisions of any law relating to the following: any felony; mass media related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination?						
If the answer is Yes, attach as an Exhibit a full disclosure of the persons and matters involved, including an identification of the court or administrative body and the proceeding (by dates and file numbers), and the disposition of the litigation. Where the requisite information has been earlier disclosed in connection with another application or as required by 47 U.S.C. Section 1.65(c), the applicant need only provide: (i) an identification of that previous submission by reference to the file number in the case of an application, the call letters of the station regarding which the application or Section 1.65 information was filed, and the date of filing; and (ii) the disposition of the previously reported matter.						

	8. Does the applicant, or any party to the application, have a the expanded band (1605-1705 kHz) or a permit or license expanded band that is held in combination (pursuant to the 5	either in the existing band of	nt .
	with the AM facility proposed to be modified herein?	year notding period allowed	•
	If Yes, provide particulars as an Exhibit.		Exhibit No,
-			
	The APPLICANT hereby waives any claim to the use of any against the regulatory power of the United States because use cauthorization in accordance with this application. (See Section	if the come whether but lines.	
12	The APPLICANT acknowledges that all the statements made in representations and that all the exhibits are a material part application.	this application and attached hereof and are incorporated	l exhibits are considered material herein as set out in full in the
7	CERTIFIC	ATION	
	1. By checking Yes, the applicant certifies, that, in the case of she is not subject to a denial of federal benefits that include Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Sa non-individual applicant (e.g., corporation, partnership association), no party to the application is subject to a definctudes FCC benefits pursuant to that section. For the definition purposes, see 47 C.F.R. Section 1.2002(b). 2. I certify that the statements in this application are true, co and are made in good faith.	of an individual applicant, he des FCC benefits pursuant to ection 862, or, in the case of or other unincorporated nial of federal benefits that nition of a "party" for these	
Γ	Name		
-	Alberto Timothy Lozano	Signature 1 Lennati	La Farmero
	THE President	Date 2017	616phone Aumber 760 = 352 - 9860
	WILLFUL FALSE STATEMENTS ON THIS FORM ARE (U.S. CODE, TITLE 18; SECTION 1001), AND/OR REVOCA (U.S. CODE, TITLE 47; SECTION 312(a)(1)), AND/OR	HIOLARIAN AND AND AND AND AND AND AND AND AND A	TENSE OF CONSTRUCTION
	FEE NOTICE TO INDIVIDUALS REQUIRED BY THE PRIM		
	The solicitation of personal information requested in this application is surhowell use the information provided in this form to determine whether grant of the law enforcement purposes, it may become necessary to refer personal information.	e application is in the public interes	

Information provided in this form will be available for public inspection. It 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 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 everage 639 hours and 53 minutes par response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data reasonal, and completing and reviewing time collection of information, including suggestions for reducing the burden, can be sent to the federal Communications Commission, Records Management French, Paper with Reducing Project (30th) 6627; Westington, D. C. 20254. Do NOT send completed forms to this address.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACTION 1024, P.U. POTTE, DECEMBER 31, 100M, SILLS OF SETMENTS, AND THE PAPER ACTION ACTION 1980, P.E. 98484 (1000) NECESSION 11, 1986, P.E. 13102.

Name of Applica	LICENSE ant	APPLICATION E	IGINEERING DA	LTA			
The '	Voice	of Christi	an Evangel	ism Tn			
PURPOSE OF	NUTHORIZ	ATION APPLIED F	OR: (check one)		e,		
	Station Lic			leasurement o	f Pawar		
1. Facilities auti	orized in c	onstruction permit			, , ower		
Call Sign	File No.	of Construction Dam	nit Frequency	1			
KGBA	I UI applies	ible)		Hours of	Operation	Power	in kilowatts
2. Station location	n	not apply	1490	Unl	imited	Night 1.0 (*) Day 1.0 (*
State							71 2.0 1
Califor				City or Town			
3. Transmitter los	mia			Heber .			
State							
	County			City or Tov	VII	Street address	W-14
Californi	2	Imperial				(or other identification)	
. Main studio loc				Hebe	r	1251 Hig	hway 86
State	County	7.0. 30.00		City or Tow			
California	1	Imperial		1		Street address (or other identification)	cation)
. Remote control	point local	ion (specify only if		El Centro pnal antenna) Does not		605 W. State St.	
itate	County	Contobecaty Office It	umonzed direction	nal antenna)	Does not	apply	oute St.
c			City or Town Street address (or other identification)				
						(Or Other ROBITUM	ation)
•		meet the requirement				X A	Not Applicable
						DATA COM	DR NO.
Operating consta	nts:						
dulation for night	system	current (in amperes)	without	RF common	point or antenna o	urrent (in amperes	s) without
A 52 /+\				modulation for day system			
asured antenna corating frequency	rcommon	point resistance (in	ohms) at	Moseumdon	4	1.52 (*)	
ht			,	operating free	tenna or common tuency	point reactance (in	n ohms) at
Day 49 (*) 49 (*)		I filiple		Day			
enna indications i		49		+j	49 (*)	+j 49	(*)
	whoould	Antenna n	oes not a				
Phase reading(s) in degrees		Antenna monitor sample current ratio(s)		Antenna base currents			
		Night	Day	Night	Day	Night	
						, agait	Day
				·~,			
-							
ufacturer and type	of antenn	a monitor: Doe	s not app	lv			
				-1			

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 Type Radiator Overall height in meters of Overall height in meters Overall height in meters If antenna is either top radiator above base above ground (without Uniform above ground (include loaded or sectionalized, insulator, or above base, if obstruction lighting) obstruction lighting) describe fully in an cross-section grounded. Exhibit. guyed 50.3 (*) Exhibit No. 50.3 (*) 50.6 (*) es not app Excitation Series Shunt Geographic coordinates to nearest second. For directional antenna give coordinates of center of array. For single vertical radiator give tower location. North Latitude 32 ° West Longitude 115 44 31 33 08 If not fully described above, attach as an Exhibit further details and dimensions including any other antenna mounted on tower and associated isolation circuits. Exhibit No. Does not apply Also, if necessary for a complete description, attach as an Exhibit a sketch of the details and Exhibit No. Does not apply 10. In what respect, if any, does the apparatus constructed differ from that described in the application for construction permit or in the permit?

This license modification application provides corrected

geographical coordinates for the KGBA antenna tower. No other
changes are proposed.

11. Give reasons for the change in antenna or common point resistance.

Does not apply

I certify that I represent the applicant in the capacity indicated below and that I have examined the foregoing statement of technical information and that it is true to the best of my knowledge and belief.

Name (Please Print or Type)				
	Signature (check appropriate box below)			
Fred W. Volken				
	Fredw. Volken			
Address (include ZIP Code)	Date			
348 W Cionne 14	Date			
348 W. Sierra Madre Blvd.	April 5 0010			
Sierra Madre, CA 91024	April 5, 2018			
	Telephone No. (Include Area Code)			
	(626) 355-1171			
Technical Director	-			

Technical Director

Registered Professional Engineer

Chief Operator

Technical Consultant

X Other (specify) Engineering Consultant

FCC 302-AM (Page 5) August 1995