

WWFX-FM

See original document in WXL0-FM File

Federal Communications Commission Washington, D.C. 20554 FCC 315	Approved by OMB 3060-0032 (June 2010) FOR FCC USE ONLY
APPLICATION FOR CONSENT TO TRANSFER CONTROL OF ENTITY HOLDING BROADCAST STATION CONSTRUCTION PERMIT OR LICENSE Read INSTRUCTIONS Before Filling Out Form	FOR COMMISSION USE ONLY FILE NO. - 20110330ADE

Section I - General Information

<p>1. Legal Name of the Licensee/Permittee RADIO LICENSE HOLDING CBC, LLC</p> <p>Mailing Address 7690 WEST CHEYENNE AVENUE SUITE 220</p> <table border="1"> <tr> <td data-bbox="209 709 586 810">City LAS VEGAS</td> <td data-bbox="586 709 1089 810">State or Country (if foreign address) NV</td> <td data-bbox="1089 709 1440 810">Zip Code 89129 - 6701</td> </tr> <tr> <td data-bbox="209 810 586 911">Telephone Number (include area code) 7028045200</td> <td colspan="2" data-bbox="586 810 1440 911">E-Mail Address (if available) LICENSE.MANAGEMENT@CITCOMM.COM</td> </tr> <tr> <td data-bbox="209 911 586 993">FCC Registration Number: 0019721638</td> <td data-bbox="586 911 1089 993">Call Sign WAPI</td> <td data-bbox="1089 911 1440 993">Facility ID Number 16900</td> </tr> </table>	City LAS VEGAS	State or Country (if foreign address) NV	Zip Code 89129 - 6701	Telephone Number (include area code) 7028045200	E-Mail Address (if available) LICENSE.MANAGEMENT@CITCOMM.COM		FCC Registration Number: 0019721638	Call Sign WAPI	Facility ID Number 16900
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<p>2. Contact Representative (if other than licensee/permittee) NANCY A. ORY</p> <p>Mailing Address 2000 K STREET, NW SUITE 600</p> <table border="1"> <tr> <td data-bbox="209 1169 586 1270">City WASHINGTON</td> <td data-bbox="586 1169 1089 1270">State or Country (if foreign address) DC</td> <td data-bbox="1089 1169 1440 1270">ZIP Code 20006 - 1809</td> </tr> <tr> <td data-bbox="209 1270 586 1373">Telephone Number (include area code) 2024166791</td> <td colspan="2" data-bbox="586 1270 1440 1373">E-Mail Address (if available) NORY@LERMANSENTER.COM</td> </tr> </table>	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20006 - 1809	Telephone Number (include area code) 2024166791	E-Mail Address (if available) NORY@LERMANSENTER.COM				
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<p>3. 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 type="radio"/> Noncommercial Educational Licensee/Permittee <input type="radio"/> Other <input checked="" type="radio"/> N/A (Fee Required) </p>									
<p>4. Purpose of Application:</p> <p> <input checked="" type="radio"/> Transfer of control of licensee <input type="radio"/> Transfer of control of permitte <input type="radio"/> Amendment to pending application </p> <p>File number of pending application: -</p> <p>If an amendment, submit as an Exhibit a listing by Section and Question Number of the portions of the pending application that are being revised. [Exhibit 1]</p>									