

(REFERENCE COPY - Not for submission)

Transfers

l I		Submit Date: 11	Submit Date: 11/25/2019 Lead		ad Call Sign: WEAG-FM		FRN: 0003771110	
Service: Full Power FM Purpose: Transfer of Control		Status: Granted Status Date: 12/13/20)19	Filing Status:			
Active								

General	Section	Question	Response
Information	Attachments	Are attachments (other than associated schedules) being filed with this application?	

Fees, Waivers, and Exemptions

Authorizations to be Transferred

Section	Question	Response
Fees	Is the applicant exempt from FCC application Fees?	No
	Indicate reason for fee exemption:	
Waivers	Does this filing request a waiver of the Commission's rule(s)?	
	Total number of rule sections involved in this waiver request:	

Transfer Type	Question	Response
	Is this application a pro forma Transfer of Control?	Yes
	By answering "Yes" the Applicant certifies that the use of short form pro forma application is appropriate for this transaction?	Yes
	Is the Transfer Voluntary or Involuntary:	Involuntary

Selected Call Signs

Call Sign Facility ID File Number Service City, State WEAG-FM 16906 BTCH-20191125AAQ FM STARKE, FL

Transfer	Question	Response
Questions	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 73.5000)?	No
	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)?	
	Have all such stations operated for at least 4 years with a minimum operating schedule since grant pursuant to the point system?	
	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)?	
	Have all such stations operated for at least 4 years with a minimum operating schedule since grant?	
	Do both the transferor and transferee qualify for the Tribal Priority in all respects?	

LPFM Licenses Only: Has it been at least 18 months since the initial construction permit for the LPFM station was granted?

LPFM Licenses Only: Does the assignment of the LPFM authorization satisfy the consideration restrictions of 47 CFR Section 73.865(a)(1)?

LPFM Licenses Only: Were any of the LPFM authorizations that are subject to this application obtained through the Commission's point system for low power FM stations (see 47 CFR Section 73.872)?

If yes to question above, have all such LPFM stations operated for at least four years since grant pursuant to the point system?" (options – Y/N. If Yes, nothing further required. No requires attachment as follows) "If no to new sub question, list pertinent authorizations in an Exhibit and include in the Exhibit a showing that the transaction is consistent with the requirements of 47 CFR Section 73.865(a)(3).

Licensee /Permittee

Information

Licensee/Permittee Name, Type, and Contact Information

Licensee/Permittee	Address	Phone	Email	FRN
DICKERSON BROADCASTING, INC. Applicant Doing Business As: DICKERSON BROADCASTING, INC.	1421 S. WATER STREET STARKE, FL 32091 United States	+1 (904) 964- 5001	CKRAMER@ATLANTIC. NET	0003771110

Licensee /Permittee Contact Representatives (1)

Licensee

/Permittee Legal Certifications

Contact Name	Address	Phone	Email	Contact Type
ANNE GOODWIN CRUMP FLETCHER, HEALD & HILDRETH, P. L.C.	1300 N. 17TH STREET ELEVENTH FLOOR ARLINGTON, VA 22209	+1 (703) 812- 0426	CRUMP@FHHLAW. COM	

	Section	Question	Response
I	Agreements for Transfer Control of Station	Licensee/Permittee certifies that: (i) it has placed its public inspection file(s) and submitted to the Commission as an Exhibit to this application copies of all agreements for the transfer of the station(s); (ii) these documents embody the complete and final understanding between Transferor and Transferee; and (iii) these agreements comply fully with the Commission's rules and policies	
	Other Authorizations	Please upload an attachment detailing the 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.	
	Character Issues	Licensee/Permittee certifies that neither licensee/permittee 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	

Adverse Findings	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.	
Local Public Notice	Licensee/Permittee certifies that it has or will comply with	
	the public notice requirements of 47 C.F.R. Section 73.3580.	
Auction Authorization	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.	
Anti-Discrimination	Licensee/Permittee certifies that neither licensee/permittee	
Certification	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.	

Transferor Information

Transferor Name, Type, and Contact Information

Information	
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Transferor	Туре	Address	Phone	Email	FRN
BENJAMIN F. DICKERSON, DECEASED Assignor Doing Business As: BENJAMIN F. DICKERSON, DECEASED	Other	1421 S. WATER STREET STARKE, FL 32091	+1 (904) 964-5001	CKRAMER@ATLANTIC. NET	0003771110

Transferor Contact Representatives (1)

Contact Name	Address	Phone	Email	Contact Type
HARRY F. COLE FLETCHER, HEALD & HILDRETH, P. L.C.	1300 N. 17TH STREET ELEVENTH FLOOR ARLINGTON, VA 22209	+1 (703) 812- 0400	COLE@FHHLAW. COM	

Transferor Legal Certifications

Section	Question	Response
Agreements for Transfer Control of Station	Transferor certifies that: (i) it has placed in Transferor's public inspection file(s) and submitted to the Commission as an Exhibit to this application copies of all agreements for the assignment /transfer of the station(s); (ii) these documents embody the complete and final understanding between Transferor and Transferee; and (iii) these agreements comply fully with the Commission's rules and policies	N/A
	If the transaction is involuntary, the Transferor certifies that court orders or other authorizing documents have been issued and that it has placed in the licensee's/permittee's public inspection file(s) and submitted to the Commission copies of such court orders or other authorizing documents.	Yes

Character Issues	Transferor certifies that neither transferor nor any party to the application has or has had any interest in, or connection with:	Yes
	 (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 	
Adverse Findings	Transferor certifies that, with respect to the Transferor 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.	Yes
Local Public Notice	Transferor certifies that it has or will comply with the public notice requirements of 47 C.F.R. Section 73.3580.	
Auction Authorization	N/A	
Anti-Discrimination Certification	Transferor 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.	

Transferee Information

Transferee Name, Type, and Contact Information

Transferee	Туре	Address	Phone	Email FRN
ESTATE OF BENJAMIN F. DICKERSON-CAROLE	Other	18178 NW	+1 (904)	0003771110
DECELLE, PERSONAL REP		STATE ROAD	964-5001	
Assignee		16		
Doing Business As: ESTATE OF BENJAMIN F.		STARKE, FL		
DICKERSON-CAROLE DECELLE, PERSONAL REP		32091		

Transferee Contact	Contact Name	9	Addr	ess		Phone	Email		Contact Type
Representatives (1)	ANNE GOOD FLETCHER, H HILDRETH, P	HEALD &	STR ELE	VENTH FLO INGTON, V		+1 (703) 812- 0426	CAROLEDECE COM	LLE08@YAHOO.	
Changes in Interest (0)	Party Name	Citizenship	Address	Phone	Ema	n il Interest Bef Empty	ore Transfer	Interest After T	ransfer
Changes in	Question								Response

Interest Certification

Parties to the Application (0)	Party Name	Citizenship	Address	Phone	Email	Positional Interest	
	Empty						
Parties to the	Question						Response
Application Certification	Applicant certifies	that equity and financia	I interests not set fo	orth by the trans	feree are nona	attributable.	

Transferee Legal Certifications

Section	Question	Response
Agreements for Sale	Transferee certifies that: (a) the written agreements in the Transferee's public inspection file and submitted to the Commission embody the complete and final agreement for the sale or transfer of the station(s); and (b) these agreements comply fully with the Commission's rules and policies.	Yes
Other Authorizations	Please upload an attachment detailing the call signs, locations, and facility identifiers of all other broadcast stations in which Transferee or any party to the application has an attributable interest.	N/A
Multiple Ownership	Is the Transferee or any party to the application the holder of an attributable radio joint sales agreement or an attributable radio or television time brokerage agreement with the station (s) subject to this application or with any other station in the same market as the station(s) subject to this application?	
	Transferee certifies that the proposed assignment complies with the Commission's multiple ownership rules.	
	 Transferee certifies that the proposed assignment: (1) does not present an issue under the Commission's policies relating to media interests of immediate family members; (2) complies with the Commission's policies relating to future ownership interests; and (3) complies with the Commission's restrictions relating to the insulation and nonparticipation of non-party investors and creditors. 	
	 Does the Transferee claim status as an "eligible entity," that is, an entity that qualifies as a small business under the Small Business Administration's size standards for its industry grouping (as set forth in 13 C.F.R. § 121-201), and holds (1) 30 percent or more of the stock or partnership interests and more than 50 percent of the voting power of the corporation or partnership that will own the media outlet; or (2) 15 percent or more of the stock or partnership interests and more than 50 percent of the voting power of the corporation or partnership that will own the media outlet, provided that no other person or entity owns or controls more than 25 percent of the outstanding stock or partnership interests; or (3) More than 50 percent of the voting power of the corporation that will own the media outlet (if such corporation is a publicly traded company)? 	

	Does this transfer include a grandfathered cluster of stations?	
	Applicant certifies that it will come in compliance by divesting the necessary station(s) within 12 months of the consummation of this transaction to:	
	A) An Eligible Entity (as defined in Item 6d, above).	
	B) An Irrevocable Trust that will assign the station(s) to an Eligible Entity.	
Acquisition of Control	Please upload an attachment listing the file number and date of grant of FCC Form 301, 314, or 315 application by which the Commission approved the qualifications of the individual or entity with a pre-existing interest in the licensee/permittee that is now acquiring control of the licensee/permittee as a result of the grant of this application.	N/A
Character Issues	Transferee certifies that neither transferee 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.	Yes
Adverse Findings	Transferee certifies that, with respect to the transferee 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.	Yes
Financial Qualifications	Transferee 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.	
Program Service Certification	Transferee 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.	
Auction Authorization	Transferee 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.	
Equal Employment Opportunity (EEO)	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.	

lien	Question	Response
	 Is the applicant a foreign government or the representative of any foreign government as specified in Section 310(a) of the Communications Act? 	
	2) Is the applicant an alien or the representative of an alien? (Section 310(b)(1))	

Tranferee Alien Ownership

3) Is the applicant a corporation, or non-corporate en government? (Section 310(b)(2))	tity, that is organized under the laws of any foreign
	ifth of the capital stock, or other equity or voting interest, is entatives or by a foreign government or representative of a foreign country? (Section 310(b)(3))
stock, or other equity or voting interest, is owned o	any other entity of which more than one-fourth of the capital of record or voted by aliens, their representatives, or by a y any entity organized under the laws of a foreign country?
6) Has the applicant received a declaratory ruling(s)	under Section 310(b)(4) of the Communications Act?
6a) Enter the citation of the applicable declaratory rul or any other identifying information.	ling by DA/FCC number, FCC Record citation, release date,
7) Has there been any change in the applicant's forei cited in response to Question 6?	gn ownership since issuance of the declaratory ruling(s)
8) Does the applicant certify that it is in compliance w declaratory ruling(s) cited in response to Question	vith the terms and conditions of the foreign ownership 6?
9) In connection with this application is the applicant	filing a foreign ownership Petition for Declaratory Ruling

Licensee /Permittee Certification	Section	Question	Response
	General Certification Statements	Licensee/Permittee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee/Permittee 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.	
		The Licensee/Permittee certifies that neither the Licensee /Permittee nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti- Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification § 1.2002(c). The Licensee/Permittee certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.	

pursuant to Section 310(b)(4) of the Communications Act?

Authorized Party to Sign	FAILURE TO SIGN THIS APPLICATION MAY RESULT IN	
	DISMISSAL OF THE APPLICATION AND FORFEITURE	
	OF ANY FEES PAID	
	Upon grant of this application, the Authorization Holder may	
	be subject to certain construction or coverage requirements.	
	Failure to meet the construction or coverage requirements	
	will result in automatic cancellation of the Authorization.	
	Consult appropriate FCC regulations to determine the	
	construction or coverage requirements that apply to the type	
	of Authorization requested in this application.	
	WILLFUL FALSE STATEMENTS MADE ON THIS FORM	
	OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND	
	/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR	
	REVOCATION OF ANY STATION AUTHORIZATION (U.S.	
	Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S.	
	Code, Title 47, §503).	
	I certify that this application includes all required and	
	relevant attachments.	
	I declare, under penalty of perjury, that I am an authorized	
	representative of the above-named applicant for the	
	Authorization(s) specified above.	

Transferee	Section	Question	Response
Certification	General Certification Statements	The Transferee certifies that neither the Transferee nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1. 2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification § 1.2002 (c). The Transferee certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.	
	Authorized Party to Sign	 FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application. WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, §503). I certify that this application includes all required and relevant attachments. 	

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

CAROLE DECELLE *PERSONAL REPRESENTATIVE*

11/25/2019

	Section	Question	Response
	General Certification Statements	The Transferor certifies that neither the Transferor nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1. 2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification § 1.2002 (c). The Transferor certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.	
	Authorized Party to Sign	 FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application. WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, §503). 	
		I certify that this application includes all required and relevant attachments.	
		I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	CAROLE DECELLE <i>PERSONAL</i> <i>REPRESENTATIVE</i>
			11/25/2019

Attachments	5
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File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>1813229_1555432.</u> <u>txt</u>	Applicant	All Purpose	APPROPRIATE USE OF FORM 316	Done with Virus Scan and/or Conversion
<u>1813229_1555433.</u> <u>txt</u>	Applicant	All Purpose	AUTHORIZING DOCUMENTS	Done with Virus Scan and/or Conversion
<u>1813229_1555434.</u> <u>txt</u>	Applicant	All Purpose	DOCUMENTS REFLECTING INVOLUNTARY TRANSFER	Done with Virus Scan and/or Conversion
<u>1813229_44148944.</u> pdf	Applicant	All Purpose	Letters of Administration and Certification of Death	Done with Virus Scan and/or Conversion