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JUN 24 2015  
FOCUS BANK

**Via UPS**

Ms. Marlene Dortch, Secretary  
Federal Communications Commission  
International and Satellite Service  
P.O. Box 979093  
St. Louis, MO 63197-9000

**RETURN COPY**  
**(FOR DATE-STAMP AND RETURN)**

**Re: WHRI(AX)**  
**Fac. Id. 26978**  
**FRN: 0005-8044-06**  
**Cypress Creek, SC**

**Application for Renewal**

Dear Ms. Dortch,

Please find enclosed an original and two (2) copies of the above referenced application that we are filing on behalf of the licensee, LeSEA Broadcasting Corporation. The application includes the Form 159 and a filed Form 396. Please stamp the one copy marked "For Date Stamp and Return" and return it to me in the pre-paid, pre-addressed UPS envelope enclosed.

If you require anything further, please do not hesitate to contact me.

Sincerely,

*Elise M. Stubbe*

Elise M. Stubbe

EMS:faz  
Encl.

Cc: LeSEA Broadcasting Corporation

**SECTION I UNITED STATES OF AMERICA  
FEDERAL COMMUNICATIONS COMMISSION**

**APPLICATION FOR RENEWAL OF AN INTERNATIONAL, OR  
EXPERIMENTAL BROADCAST STATION LICENSE**

**APPLICANT SHOULD NOT USE THIS BOX**

**INSTRUCTIONS**

- A. This form is to be used in all cases when applying for Renewal of an International or Experimental Broadcast Station License. This form consists of this part, Section I, and Section VI.
- B. Prepare an original and two copies of this form and all exhibits with the Federal Communications Commission, Washington, D.C. 20554.
- C. Number exhibits serially in the space provided in the body of the form and list each exhibit in the space provided on page 3 of this form. Date each exhibit.
- D. The name of the applicant must be stated exactly as it appears on the current license.
- E. Information called for by this application which is already on file with the Commission need not be refiled in this application provided (1) the information is now on file in another application or FCC form filed by or on behalf of this applicant; (2) the information is identified fully by reference to the file number (if any), the FCC form number, and the filing date of the application or other form containing the information and the page or paragraph referred to, and (3) after making the reference, the applicant states: "No change since date of filing." Any such reference will be considered to incorporate into this application all information, confidential or otherwise, contained in the application or other form referred to. The incorporated application or other form will thereafter, in its entirety, be open to the public.
- F. This application shall be personally signed by the applicant, if the applicant is an individual; by one of the partners, if the applicant is a partnership; by an officer, if the applicant is a corporation; by a member who is an officer, if the applicant is an unincorporated association; by such duly elected or appointed officials as may be competent to do so under the laws of the applicable jurisdiction, if the applicant is an eligible governmental entity; or by the applicant's attorney in case of the applicant's physical disability or of her/his absence from the United States. The attorney shall, in the event she/he signs for the applicant, separately set forth the reason why the application is not signed by the applicant. In addition, if any matter is stated on the basis of the attorney's belief only (rather than knowledge) she/he shall separately set forth her/his reasons for believing that such statements are true.
- G. **BE SURE ALL NECESSARY INFORMATION IS FURNISHED AND ALL PARAGRAPHS ARE FULLY ANSWERED. IF ANY PORTIONS OF THE APPLICATION ARE NOT APPLICABLE, SPECIFICALLY SO STATE. DEFECTIVE OR INCOMPLETE APPLICATIONS MAY BE RETURNED WITHOUT CONSIDERATION.**

File No.

1. Name of applicant (See Instruction D)

LeSEA Broadcasting Corporation

Street Address  
61300 Ironwood Road

City South Bend	State IN	ZIP Code 46614
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Telephone (include Area Code)  
(574) 291-8200

2. Name and address of person to whom communications should be sent, if different from item 1

Name  
Elise M. Stubbe, Esq.

Street Address  
1080 W. Causeway Approach

City Mandeville	State LA	ZIP Code 70471
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Telephone (include Area Code)  
(985) 629-0777

3. Renewal requested for following facilities

Type of station (See instructions) International High Frequency	Call sign WHRI
--------------------------------------------------------------------	-------------------

Transmitter Location  
Furman (Cypress Creek), SC  
32-41-3.0 N 81-7-50 W

Frequency As per FCC freq hour authorization	Antenna input power 500 kW
-------------------------------------------------	-------------------------------

Hours of Operation  
unlimited

4. When reference is made to information filed in prior application (see instruction E), give proper reference:

<u>Paragraph No.</u>	<u>File or Form No.</u>	<u>Date Filed</u>
n/a		

Have there been any substantial changes in the information incorporated in this application by reference in this paragraph?

Yes  No   
n/a

**SECTION I**

	(X yes or no)	Yes	No
5. Is applicant, or any person directly or indirectly controlling applicant, party to a suit in any Federal Court involving the monopolizing, or an attempt to monopolize radio communication directly or indirectly through control of the manufacture or sale of radio apparatus, by exclusive traffic arrangement or by any other means, or of using unfair methods of competition? (If "Yes", attach as EXHIBIT _____ a full description of the proceeding, identifying the court and showing where records of the proceeding may be obtained. See Sec. 818 of the Communications Act of 1934.)			X X
6. Have there been any changes in ownership since the filing of the last application for construction permit or renewal of license, or in the case of an International Station, is the information shown in applicant's Ownership Reports, now on file with the Commission, true and correct as of this date? (If "No", attach as EXHIBIT _____ an Ownership Report supplying full information to bring such data up to date.)		X See Ex 1 See Ex 1	
7. Has there been any change in the citizenship of the applicant?			X X
8. Is the applicant a representative of an alien or foreign government?			X X
9. Are there any documents, instruments, contracts or understandings relating to ownership, management, use or control of the station or facilities, or any right or interest therein? (If "Yes", attach as EXHIBIT _____ copies of all such documents, instruments or contracts and state the substance of oral contracts or understandings.)			X X
10. Attach as EXHIBIT _____ a complete report of experimentation conducted during the present license period including therein the number of hours of operation, full data on research and experimentation conducted including the type of transmitting and studio (if any) equipment used and their mode of operation, data on expense of research and operation during the period covered, data on any measurements, tests, or observations conducted and description of the apparatus employed, estimated degree of public participation (solicited or unsolicited), complete details of any reported interference and steps taken to eliminate such interference, conclusions, tentative and final, program for further research experimentation requiring additional time and estimate of additional time required to complete the experimentation and terminate operation, and full details of developments and major changes in equipment. (Not required of International Broadcast Stations.)			Not applicable
11. In what respect, if any, does the apparatus, antenna, or operation differ from that described in the last application for license or renewal of license?			

No changes

THE APPLICANT hereby waives any claim to the use of any particular frequency or of the electromagnetic spectrum 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).

THE APPLICANT represents that this application is not filed for the purpose of impeding, obstructing, or delaying determination on any other application with which it may be in conflict.

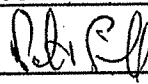
THE APPLICANT acknowledges that all the statements made in this application and attached exhibits are considered material representations, and that all the exhibits are a material part hereof and are incorporated herein as if set out in full in the application.

**CERTIFICATION**

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.

Signed and dated this 17 day of June, 2015, LeSEA Broadcasting Corporation  
(Name of applicant)

**WILLFUL FALSE STATEMENTS MADE ON THIS FORM  
 ARE PUNISHABLE BY FINE AND IMPRISONMENT.  
 U.S. CODE, TITLE 18, SECTION 1001.**

Signed by   
 Title Peter Sumrall, President

**FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT**

We have estimated that each response to this collection of information will take 2 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain the required data, and actually complete and review the form or response. If you have any comments on this burden estimate, or on how we can improve the collection and reduce the burden it causes you, please e-mail them to [prra@fcc.gov](mailto:prra@fcc.gov) or send them to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-1035), Washington, DC 20554. Please DO NOT SEND COMPLETED APPLICATIONS TO THIS ADDRESS. Remember - you are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1035.  
**THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, P.L. 104-13, OCTOBER 1, 1995, 44 U.S.C. 3507.**

## SECTION I

EXHIBITS furnished as required by this form:

Exhibit No.	Paragraph Number requiring Exhibit	Name of officer or employee (1) by whom or (2) under whose direction exhibit was prepared (show which)	Official title
1	6	Peter Sumrall	President
2	Section VI	Peter Sumrall	President
3	n/a	Larry Vehorn	Dir. of Engineering



Federal Communications Commission Washington, D.C. 20554  <p style="text-align: center;"><b>FCC 396</b></p>	Approved by OMB 3060-0113 (March 2003)  FOR FCC USE ONLY
<p><b>BROADCAST EQUAL EMPLOYMENT OPPORTUNITY PROGRAM REPORT</b></p> (To be filed with broadcast license renewal application)  Read INSTRUCTIONS Before Filling Out Form	FOR COMMISSION USE ONLY FILE NO. - 20150622AFG

**Section I**

Legal Name of the Licensee LESEA BROADCASTING CORPORATION		
Mailing Address 61300 S. IRONWOOD ROAD		
City SOUTH BEND	State or Country (if foreign address) IN	Zip Code 46614 -
Telephone Number (include area code) 5742918200	E-Mail Address (if available)	
Facility ID Number 26978		Call Sign WHRI

<b>TYPE OF BROADCAST STATION:</b> (if applicable)	Commercial Broadcast Station <input type="radio"/> Radio <input type="radio"/> TV <input type="radio"/> Low Power TV <input checked="" type="radio"/> International	Noncommercial Broadcast Station <input type="radio"/> Educational Radio <input type="radio"/> Educational TV
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**Application Purpose**

New Program Report

Amendment to Program Report

List call sign and location of all stations included on this statement. List commonly owned stations that share one or more employees. Also list stations operated by the licensee pursuant to a time brokerage agreement. Indicate on the table below which stations are operated pursuant to a time brokerage agreement. To the extent that licensees include stations operated pursuant to a time brokerage agreement on this report, responses or information provided in Sections I through II should take into consideration the licensee's EEO compliance efforts at brokered stations, as well as any other stations, included on this form. For purposes of this form, a station employment unit is a station or a group of commonly owned stations in the same market that share at least one employee.

[Stations Locations]

**Station List**

List call sign and location of all stations included on this statement. List commonly owned stations that share one or more employees. Also list stations operated by the licensee pursuant to a time brokerage agreement. Indicate on the table below which stations are operated pursuant to a time brokerage agreement. To the extent that licensees include stations operated pursuant to a time brokerage agreement on this report, responses should take into consideration the licensee's EEO compliance efforts at brokered stations, as well as any other stations, included on this form. For purposes of this form, a station employment unit is a station or a group of commonly owned stations in the same market that share at least one employee.

Call Sign	Facility ID Number	Type (check applicable box)	Location (City/State)	Time Brokerage Agreement (check applicable box)
WHRI	26978	<input type="radio"/> AM <input type="radio"/> FM <input checked="" type="radio"/> TV	CYPRESS CREEK, SC	<input type="radio"/> Yes <input checked="" type="radio"/> No

**CONTACT PERSON IF OTHER THAN LICENSEE**

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Name JOSEPH C. CHAUTIN, III		Street Address 1080 WEST CAUSEWAY APPROACH	
City MANDEVILLE	State LA	Zip Code 70471-	Telephone Number 9856290777

**FILING INSTRUCTIONS**

Broadcast station licensees are required to afford equal employment opportunity to all qualified persons and to refrain from discriminating in employment and related benefits on the basis of race, color, national origin, religion, and sex. See 47 C.F.R. Section 73.2080. Pursuant to these requirements, a license renewal applicant whose station employment unit employs five or more full-time station employees must file a report of its activities to ensure equal employment opportunity. If a station employment unit employs fewer than five full-time employees, no equal employment opportunity program information need be filed. If a station employment unit is filing a combined report, a copy of the report must be filed with each station's renewal application.

A copy of this report must be kept in the station's public file. These actions are required to obtain license renewal. Failure to meet these requirements may result in sanctions or license renewal being delayed or denied. These requirements are contained in 47 C.F.R. Section 73.2080 and are authorized by the Communications Act of 1934, as amended.

DISCRIMINATION COMPLAINTS. Have any pending or resolved complaints been filed during this license term  Yes  No before any body having competent jurisdiction under federal, state, territorial or local law, alleging unlawful discrimination in the employment practices of the station(s)?

If so, provide a brief description of the complaint(s), including the persons involved, the date of the filing, the court or agency, the file number (if any), and the disposition or current status of the matter.

[Exhibit 1]

Does your station employment unit employ fewer than five full-time employees?  Yes  No

Consider as "full-time" employees all those permanently working 30 or more hours a week.

If your station employment unit employs fewer than five full-time employees, complete the certification below, return the form to the FCC, and place a copy in your station(s) public file. You do not have to complete the rest of this form. If your station employment unit employs five or more full-time employees, you must complete all of this form and follow all instructions.

**CERTIFICATION.**

This report must be certified, as follows:

- A. By licensee, if an individual;
- B. By a partner, if a partnership (general partner, if a limited partnership);
- C. By an officer, if a corporation or an association; or
- D. By an attorney of the licensee, in case of physical disability or absence from the United States of the licensee.

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).

**I certify to the best of my knowledge, information and belief, all statements contained in this report are true and correct.**

Signed	Name of Respondent PETER SUMRALL
Title PRESIDENT	Telephone No. ( include area code) 5742918200
Date 6/17/2015	

**The purpose of this document is to provide broadcast licensees, the FCC, and the public with information about whether the station is meeting equal employment opportunity requirements.**

**GENERAL POLICY**

A broadcast station must provide equal employment opportunity to all qualified individuals without regard to their race, color, national origin, religion or sex in all personnel actions including recruitment, evaluation, selection, promotion, compensation, training and termination.

**RESPONSIBILITY FOR IMPLEMENTATION**

A broadcast station must assign a particular official overall responsibility for equal employment opportunity at the station. That official's name and title are:

Name: PETER SUMRALL	Title: PRESIDENT
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It is also the responsibility of all persons at a broadcast station making employment decisions with respect to recruitment, evaluation, selection, promotion, compensation, training and termination of employees to ensure that no person is discriminated against in employment because of race, color, religion, national origin or sex.

<p><b>I. EEO PUBLIC FILE REPORT</b>                  Attach as an exhibit one copy of each of the EEO public file reports from the previous two years. Stations are required to place annually such information as is required by 47 C.F.R. Section 73.2080 in their public files.</p>	[Exhibit 2]
<p><b>II. NARRATIVE STATEMENT</b>                  Provide a statement in an exhibit which demonstrates how the station achieved broad and inclusive outreach during the two-year period prior to filing this application. Stations that have experienced difficulties in their outreach efforts should explain.</p>	[Exhibit 3]

**FCC NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT**

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this report. We will use the information you provide to determine if the benefit requested is consistent with the public interest. If we believe there may be a violation or potential violation of a FCC statute, regulation, rule or order, your request may be referred to the Federal, state or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your request may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party to a proceeding before the body or has an interest in the proceeding. In addition, all information provided in this form will be available for public inspection. If you owe a past due debt to the federal government, any information you provide may also be disclosed to the Department of Treasury Financial Management Service, other federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide this information to these agencies through the matching of computer records when authorized. We have estimated that each response to this collection of information will average 5 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-0113), Washington, D. C. 20554. We will also accept your comments via the Internet if you send them to [jboley@fcc.gov](mailto:jboley@fcc.gov). Remember - you are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0113.

**THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, P.L. 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3), AND THE PAPERWORK REDUCTION ACT OF 1995, P.L. 104-13, OCTOBER 1, 1995, 44 U.S.C. 3507.**

**Exhibits**