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**Federal Communications Commission  
Wireless Telecommunications Bureau**

**RADIO STATION AUTHORIZATION**

LICENSEE: COMMUNITY HEALTH CENTER OF BRANCH COUNTY

COMMUNITY HEALTH CENTER OF BRANCH COUNTY  
274 E CHICAGO STREET  
COLDWATER, MI 49036

<b>Call Sign</b> WPYQ403	<b>File Number</b> 0010775847
<b>Radio Service</b> IG - Industrial/Business Pool, Conventional	
<b>Regulatory Status</b> PMRS	
<b>Frequency Coordination Number</b>	

FCC Registration Number (FRN): 0002734721

<b>Grant Date</b> 11-16-2023	<b>Effective Date</b> 11-16-2023	<b>Expiration Date</b> 09-23-2033	<b>Print Date</b> 11-17-2023
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**STATION TECHNICAL SPECIFICATIONS**

**Fixed Location Address or Mobile Area of Operation**

**Loc. 1 Address:** 274 E Chicago Street  
**City:** Kalamazoo **County:** BRANCH **State:** MI  
**Lat (NAD83):** 41-56-21.2 N **Long (NAD83):** 084-59-27.9 W **ASR No.:** **Ground Elev:** 303.0

**Loc. 2 Area of operation**  
Operating within a 20.0 km radius around fixed location 1

**Antennas**

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000451.50000000	FB2C	1		11K2F3E	25.000	50.000	18.0	26.0	09-29-2004
2	1	000451.50000000	MO	15		11K2F3E	25.000	25.000			09-29-2004
2	1	000456.50000000	MO	15		11K2F3E	25.000	25.000			09-29-2004

**Conditions:**

Pursuant to §309(h) of the Communications Act of 1934, as amended, 47 U.S.C. §309(h), this license is subject to the following conditions: This license shall not vest in the licensee any right to operate the station nor any right in the use of the frequencies designated in the license beyond the term thereof nor in any other manner than authorized herein. Neither the license nor the right granted thereunder shall be assigned or otherwise transferred in violation of the Communications Act of 1934, as amended. See 47 U.S.C. § 310(d). This license is subject in terms to the right of use or control conferred by §706 of the Communications Act of 1934, as amended. See 47 U.S.C. §606.

**Licensee Name:** COMMUNITY HEALTH CENTER OF BRANCH

**Call Sign:** WPYQ403

**File Number:** 0010775847

**Print Date:** 11-17-2023

**Control Points**

**Control Pt. No. 1**

**Address:** 274 E Chicago Street

**City:** Coldwater **County:** BRANCH **State:** MI **Telephone Number:** (517)279-5424

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**Associated Call Signs**

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TEST TEST TEST <NA>

**Waivers/Conditions:**

NONE