

(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0005882576** File Number: **0000082525** Submit Date: **09/30/2019** Call Sign: **WOKC** Facility ID: **50166** City:

OKEECHOBEE State: FL

Service: Full Power AM Purpose: EEO Report Status: Received Status Date: 09/30/2019 Filing Status: Active

# General Information

Section	Question	Response	
Application Description	Description of the application (255 characters max.) is visible only to you and is not part of the submitted application. It will be displayed in your Applications workspace.	2019 Okeechobee Schedule 396	
Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes	

### Licensee Information

#### **Licensee Name, Type and Contact Information**

Applicant	Address	Phone	Email	Applicant Type
GLADES MEDIA COMPANY LLC Doing Business As: GLADES MEDIA COMPANY LLC	530 EAST ALVERDEZ AVE (C/O WAFC) CLEWISTON, FL 33440 United States	+1 (561) 625- 5900	W4JBZ@BELLSOUTH. NET	LLC

# **Contact Representatives**

Contact Name	Address	Phone	Email	Contact Type
Joseph A Belisle BELISLE LAW FIRM PA	P.O. BOX 970620 MIAMI, FL 33197 United States	+1 (305) 978- 7675	JOE@BELISLELAW. COM	Legal Representative
James M Johnson TECHNICAL CONSULTANT James M. Johnson	10144 SEAGRAPE WAY PALM BEACH GARDENS, FL 33418 United States	+1 (561) 625- 5900	jim@gladesmedia. com	Technical Representative

# **Common Stations**

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
183336	WLMX	OKEECHOBEE	FL	Yes
50166	WOKC	OKEECHOBEE	FL	No

# Program Report Questions

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

Full-time Employees  Does your station employment unit employ fewer than five full-time employees? Consider as "full-time" employees all those permanently working 30 or more hours a week?	No
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### Additional Program Report Questions

### 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	Title
Wayne Cunningham	General Manager

### Certification

Question	Response
The undersigned certifies that he or she is (a) the party filing the report, or an officer, director, member, partner, trustee, authorized employee, or other individual or duly elected or appointed official who is authorized to sign on behalf of the party filing the report; or (b) an attorney qualified to practice before the Commission under 47 C.F. R. Section 1.23(a), who is authorized to represent the party filing the report, and who further certifies that he or she has read the document; that to the best of his or her knowledge, information, and belief there is good ground to support it; and that it is not interposed for delay	
Certified Date	09/30 /2019
Certified Title	Trustee of Member
Authorized Party Name	James M Johnson

### **Attachments**

File Name	Uploaded By	Attachment Type	Description	Upload Status
2018-eeo-report-wokc-20181001- 165818715-doc.pdf	Applicant	EEO Public File Report	2018 EEO Public File Report	Done with Virus Scan and /or Conversion
2019-eeo-report-wokc-20190925- 115402863-doc.pdf	Applicant	EEO Public File Report	2019 EEO Public File Report	Done with Virus Scan and /or Conversion
EEO NARRATIVE STATEMENT- Singular.pdf	Applicant	Narrative Statement	EEO Narrative Statement	Done with Virus Scan and /or Conversion