

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0016525131** | File Number: **0000082479** | Submit Date: **09/27/2019** | Call Sign: **WNZF** | Facility ID: **134066** | City: **BUNNELL** | State: **FL**
 Service: **Full Power AM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **09/27/2019** | 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.	WNZF-WBHQ-WBHU-WAKX EEO Form 396.
Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
FLAGLER BROADCASTING, LLC Doing Business As: FLAGLER BROADCASTING, LLC	2405 EAST MOODY BOULEVARD, SUITE 402 BUNNELL, FL 32110 United States	+1 (386) 437-1992	DAVID@WNZF.COM	Company

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Gary S. Smithwick , Esquire . Legal Counsel SMITHWICK & BELENDIUK, P.C.	Mr. Gary S. Smithwick 5028 WISCONSIN AVE., N.W. SUITE 301 WASHINGTON, DC 20016 United States	+1 (202) 363-4560	GSMITHWICK@FCCWORLD.COM	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
134066	WNZF	BUNNELL	FL	No
183339	WAKX	PALM COAST	FL	No
53672	WBHU	ST. AUGUSTINE BEACH	FL	No
68760	WBHQ	BEVERLY BEACH	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
David L. Ayres	Vice President

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	09/27 /2019
Certified Title	Vice President
Authorized Party Name	David L Ayres

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
2017-2018-eeo-public-file-report.pdf	Applicant	EEO Public File Report	2017-2018 EEO Public File Report	Done with Virus Scan and/or Conversion
2018-2019-eeo-public-file-report.pdf	Applicant	EEO Public File Report	2018-2019 EEO Public File Report	Done with Virus Scan and/or Conversion
EEO OUTREACH STATEMENT.pdf	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and/or Conversion