

(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0006661136** | File Number: **0000117939** | Submit Date: **07/16/2020** | Call Sign: **WXPR** | Facility ID: **72220** | City: **RHINELANDER** | State: **WI**  
 Service: **Full Power FM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **07/16/2020** | Filing Status: **Active**

## General Information

Section	Question	Response
<b>Application Description</b>	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.	Form 396 for License Renewal 2020
<b>Attachments</b>	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
<b>WHITE PINE COMMUNITY BROADCASTING, INC.</b> Doing Business As: WHITE PINE COMMUNITY BROADCASTING, INC.	28 N. STEVENS ST. RHINELANDER, WI 54501 United States	+1 (715) 362-6000	JESSIE@WXPR.ORG	Company

## Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Nick Church WHITE PINE COMMUNITY BROADCASTING, INC.	28 N. STEVENS ST. RHINELANDER, WI 54501 United States	+1 (715) 362-6000	nick@wxpr.org	Technical Representative

## Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
72222	WXPW	WAUSAU	WI	No
72220	WXPR	RHINELANDER	WI	No

## Program Report Questions

Section	Question	Response
<b>Discrimination Complaints</b>	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
<b>Full-time Employees</b>	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

## Additional

### Responsibility for Implementation

**Program Report Questions**

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
Jessica R Dick	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	07/16 /2020
Certified Title	General Manager
Authorized Party Name	Jessica Dick

**Attachments**

File Name	Uploaded By	Attachment Type	Description	Upload Status
<a href="#">Annual EEO Public File Report 2019.pdf</a>	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
<a href="#">Annual EEO Public File Report 2020.pdf</a>	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
<a href="#">Narrative Statement 2020.pdf</a>	Applicant	Narrative Statement		Done with Virus Scan and/or Conversion