

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0006153977
 File Number:
 0000082328
 Submit Date:
 09/26/2019
 Call Sign:
 WYKS
 Facility ID:
 24208
 City:

 GAINESVILLE
 State:
 FL

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 09/26/2019
 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.	WYKS(FM)/WAJD(AM) 2019 EEO Program Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
Gillen Broadcasting Corporation Doing Business As: Gillen Broadcasting Corporation	7120 SW 24th Avenue Gainesville, FL 32607 United States	+1 (352) 331- 2200	dgillen1@cox. net	COR

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	Mark N. Lipp , Esq . FCC Counsel Fletcher, Heald & Hildreth, P.L.C.	1300 North 17th Street 11th Floor Arlington, VA 22209 United States	+1 (703) 812-0445	lipp@fhhlaw.com	Legal Representative

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	24209	WAJD	GAINESVILLE	FL	No
	24208	WYKS	GAINESVILLE	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

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		
	Douglas Gillen	Owner/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			
	Certified Title			
	Authorized Party Name		Douglas Gillen	

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>Gillen B'casting 2018 EEO PFR</u> (FINAL).pdf	Applicant	EEO Public File Report	Gillen Broadcasting 2018 EEO Public File Report	Done with Virus Scan and/or Conversion
Gillen B'casting 2019 EEO Public File Rpt.pdf	Applicant	EEO Public File Report	Gillen B'casting 2019 EEO Public File Report	Done with Virus Scan and/or Conversion
<u>Gillen B'casting - Schedule 396-</u> Outreach Efforts.pdf	Applicant	Narrative Statement	Gillen B'casting - Narrative re Outreach Efforts	Done with Virus Scan and/or Conversion