

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000090069
 Submit Date:
 2019-11-15
 FRN:
 0006920771

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 11/15/2019

 Filing Status:
 Active
 Status:
 Status
 Status Date:
 11/15/2019

Section I - General Information

1. Respondent

FRN	Name
0006920771	ROGER W. WRIGHT

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 156	LAWRENCEBURG	TN	38464	+1 (931) 629- 7713	proscomm@bellsouth. net

Organization

2. Contact Representative

Larry D. Perry, Esq.		Larry Perry & Aassociates				
			7 in			
Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email	
Street Address	City (and Country in non 0.0. address)	State	Coue	THONE	Linan	
11464 Saga Ln	Knoxville	TN	37931	+1 (865) 927-8474	larryperry@att.net	

3. Application Filing Fee Not Applicable

Name

4. Nature of Respondent

(a) Provide the following information about the Respondent:					
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees				
Nature of Respondent	Sole proprietorship				
(b) Provide the following information about this report:					

Purpose	Biennial		
"As of" date	10/01/2019		
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.		

Licensee/Permittee Name				FRN		
ROGER W. WRIGHT			0006920771			
Fac. ID No.	Call Sign	City		State	Service	
53664	WLLX	LAWRENCEBURG		TN	FM	
53665	WWLX	LAWRENCEBURG		TN	АМ	

Section II – Biennial Ownership Information

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all 1.47 C.F.R. contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this Section 73.3613 report. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be and Other disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an Documents attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select "Not Applicable" in response to this question. Not Applicable. (a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by 2. Ownership generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent Interests itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated partners, non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately. Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i). In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted. Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted. Please see the Instructions for further detail concerning interests that must be reported in response to this question. The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement. **Ownership Information**

FRN	0006920771		
Name	ROGER W. WRIGHT		
Address	PO Box 156		
	Street 1		
	Street 2		
	City LAWRENCEBURG		
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	38464	
	Country (if non-U.S. address)	United States	

Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	0.0% Jointly Held? No		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations				

that do not appear on this report?

Ownership Information					
FRN	9990136929				
Name	Roger Wright				
Address	PO Box	156			
	Street 1				
	Street 2				
	City	LAWRENCEBURG	LAWRENCEBURG		
	State ("NA" if non-U.S. address)	TN	TN		
	Zip/Postal Code	38464			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	Owner, Attributable Investor				
Citizenship, Gender,	Citizenship	US			
Ethnicity, and Race Information (Natural	Gender	Male			
Persons Only)	Ethnicity	Not Hispanic or Latino			
	Race	White			
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No		
from 0.0 to 100.0)	Equity	100.0%			
	Total assets (Equity Debt Plus)	100.0%			
Does interest holder have a that do not appear on this re	Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

(c) Does the Respondent or any reported interest holder	
hold an attributable interest in any newspaper entities in	
the same market as any station for which this report is	
filed, as defined in 47 C.F.R. Section 73.3555?	
If "Yes," provide information describing the interest(s), using	
EITHER the subform OR the spreadsheet option below.	
Respondents with a large number (50 or more) of entries to	
submit should use the spreadsheet option.	
NOTE: Spreadsheets must be submitted in a special XML	
Spreadsheet format with the appropriate structure that is	
specified in the documentation. For instructions on how to	
use the spreadsheet option to complete this question	
(including templates to start with), please Click Here.	
If using the subform, leave the percentage of total assets	
(Equity Debt Plus) field blank for an interest holder unless	
that interest holder has an attributable interest in the	
newspaper entity solely on the basis of the Commission's	
Equity Debt Plus attribution standard, 47 C.F.R. Section	
73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA"	
into the percentage of total assets (Equity Debt Plus) field	
for an interest holder unless that interest holder has an	
attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution	
standard.	
The Deependent must are ide on FOO Desistration Number	
The Respondent must provide an FCC Registration Number for each interest holder reported in response to this	
question. Please see the Instructions for detailed information	
and guidance concerning this requirement.	

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other No or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution exemption for any officer or director with
duties wholly unrelated to the Licensee(s)?NoIf "Yes," complete the information in the required fields and submit an Exhibit fully describing
that individual's duties and responsibilities, and explaining why that individual should not beNo

Certification

Section

attributed an interest.

Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: Sole Proprietor Exact Legal Title or Name of Respondent: Licensee Name: Roger Wright Phone: 9316297713 11/15/2019