

Broadcast Equal Employment Opportunity **Program Report**

Licensee Name, Type and Contact Information

FRN: 0014489504 File Number: 0000091620 Submit Date: 11/27/2019 Call Sign: WDAL Facility ID: 54518 City: DALTON State: GA Service: Full Power AM Purpose: EEO Report Status: Received Status Date: 11/27/2019 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.	EEO Program Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Common **Stations**

Applicant	Address	Phone	Email	Applicant Type
NORTH GEORGIA RADIO GROUP, L. P.	PO BOX 1284 DALTON, GA 30722 United States	+1 (706) 272- 5827	pfink@sclairco. com	LIP

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	F. Scott Pippin Attorney Lerman Senter PLLC	2001 L Street, NW Suite 400 Washington, DC 20036 United States	+1 (202) 429-8970	spippin@lermansenter.com	Legal Representative

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
4059	WOCE	RINGGOLD	GA	No
54518	WDAL	DALTON	GA	No
49233	WBLJ	DALTON	GA	No
54517	WYYU	DALTON	GA	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

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	Name Title					
	Paul Fink	General Manager					
Certification	Question		Response				
	trustee, authorized employ on behalf of the party filing F.R. Section 1.23(a), who or she has read the docum	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		Paul G. Fink				

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
Narrative Statement.pdf	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and/or Conversion
<u>North Georgia EEO 2018.</u> <u>pdf</u>	Applicant	EEO Public File Report	2018 EEO Report	Done with Virus Scan and/or Conversion
<u>North Georgia EEO 2019.</u> pdf	Applicant	EEO Public File Report	2019 EEO Report	Done with Virus Scan and/or Conversion