

Broadcast Equal Employment Opportunity Program Report

 FRN:
 0019718634
 File Number:
 0000096027
 Submit Date:
 01/09/2020
 Call Sign:
 WILN
 Facility ID:
 4125
 City:

 PANAMA CITY
 State:
 FL

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 01/09/2020
 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.	Magic Broadcasting II LLC - Amended EEO Program Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Li	icensee l	Name, ⁻	Type and	Contact	Informati	on
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Applicant	Address	Phone	Email	Applicant Type
MAGIC BROADCASTING II, LLC	7106 LAIRD STREET SUITE 102 PANAMA CITY BEACH, FL 32408 United States	+1 (850) 230- 5855	dongmccoy@aol. com	LLC

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	Matthew H McCormick , Esq Fletcher, Heald & Hildreth, PLC	1300 N 17th Street Suite 1100 Arlington, VA 22209 United States	+1 (703) 812- 0400	mccormick@fhhlaw. com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
67074	WYOO	SPRINGFIELD	FL	No
4125	WILN	PANAMA CITY	FL	No
25412	WYYX	BONIFAY	FL	No
15979	WVFT	GRETNA	FL	No
72956	WWLY	PANAMA CITY 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						
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								
	Donald McCoy	Member							
	• *		_						
Certification	Question		Response						
	trustee, authorized employ behalf of the party filing the R. Section 1.23(a), who is	hat he or she is (a) the party filing the report, or an officer, director, mee, or other individual or duly elected or appointed official who is auther report; or (b) an attorney qualified to practice before the Commission authorized to represent the party filing the report, and who further cert; that to the best of his or her knowledge, information, and belief there not interposed for delay	norized to sign on n under 47 C.F. tifies that he or						
	Certified Date		01/09 /2020						
	Certified Title								
	Authorized Party Name		Donad G McCoy						

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
EEO Narrative Statement.pdf	Applicant	Narrative Statement	EEO Narrative Statement	Done with Virus Scan and/or Conversion
EEO Program Report - Amendment Exhibit.pdf	Applicant	All Purpose	Purpose of Amendment	Done with Virus Scan and/or Conversion
Magic Broadcasting - 2017-2018 Annual EEO Report.pdf	Applicant	EEO Public File Report	2017-2018 Annual EEO Report	Done with Virus Scan and/or Conversion
Magic Broadcasting - 2018-2019 Annual EEO Report.pdf	Applicant	EEO Public File Report	Amended 2018-2019 Annual EEO Report	Done with Virus Scan and/or Conversion