

(REFERENCE COPY - Not for submission)

Noncommercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323-E)

File Number: **0000188579** | Submit Date: **2022-04-01** | FRN: **0008474959**

Purpose: Noncommercial Broadcast Stations Non-Biennial Ownership Report Status: Received Status Date:

04/01/2022 Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0008474959	City of Ocean Shores	

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
585 POINT BROWN AVE NW	OCEAN SHORES	WA	98569	+1 (360) 289- 3099	SANDERSON@OSGOV. COM

2. Contact Representative

Na	me	Organization
EF	RIK C. SWANSON	HATFIELD & DAWSON

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
9500 GREENWOOD AVE N	SEATTLE	WA	98103	+1 (206) 783- 9151	ESWANSON@HATDAW.

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information	on about the Respondent.		
Relationship to stations/permits	Entity required to file a Form 323-E because it holds an attributable interest in one or more Licensees or Permittees		
Is the Respondent's governing bo indirectly under the control of ano	No		

(b) Provide the following information about this report:		
Purpose	Report by Permittee filing within 30 days after the grant of a construction permit for a new noncommercial FM or full power television broadcast station	

"As of" date	04/01/2022
	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.

5. Licensee(s) /Permittees(s) and Station(s) /Permit(s)

Respondent is filing this report to cover the following Licensee(s)/Permittee(s) and station(s)/permit(s):

Licensee/I	Permittee Name	FRN
City of Oc	ean Shores	0008474959

Fac. ID No.	Call Sign	City	State	Service
762146		OCEAN SHORES	WA	FM

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 Documents

Licensee/Permittee Respondents should list all 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 report. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee/Permittee Respondents should select "Not Applicable" in response to this question.

Not Applicable.

2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, members of the governing board (or other governing entity), stockholders, 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) or Permittee(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) or Permittee(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	0008474959	0008474959		
Entity Name	City of Ocean Shore	City of Ocean Shores		
Address	РО Вох	РО Вох		
	Street 1	585 POINT BROWN AVE NW		
Street 2				
	City	OCEAN SHORES		
		·		

	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98569	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No	

Ownership Information				
FRN	9990149895	9990149895		
Name	RICH HARTMAN	RICH HARTMAN		
Address	РО Вох			
	Street 1	585 POINT BROWN AVE NW	I	
	Street 2			
	City	OCEAN SHORES		
	State ("NA" if non-U.S. address)	WA		
	Zip/Postal Code	98569		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	COUNCILMEMBER	COUNCILMEMBER		
By Whom Appointed or Elected	CITIZENS OF OCEAN SHORES			
Interest Percentages	Voting	12.5%		
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)			
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?				

Ownership Information		
FRN	9990149896	
Name	FRANK ELDUEN	
Address	РО Вох	

	Street 1	585 POINT BROWN AVE NW	,
	Street 2		
	City	OCEAN SHORES	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98569	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	COUNCILMEMBER		
By Whom Appointed or Elected	CITIZENS OF OCEAN SHORES		
Interest Percentages Voting 12.5%		12.5%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one or report?	more broadcast stations	No

Ownership Information			
FRN	9990149897		
Name	LISA SCOTT		
Address	PO Box		
	Street 1	585 POINT BROWN AVE NW	
	Street 2		
	City	OCEAN SHORES	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98569	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	COUNCILMEMBER		
By Whom Appointed or Elected	CITIZENS OF OCEAN SHORES		
Interest Percentages	Voting	12.5%	
(enter percentage values from 0.0 to 100.0)			

	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this re	n attributable interest in one or eport?	more broadcast stations	No

Ownership Information				
FRN	9990149898			
Name	JON MARTIN			
Address	PO Box			
	Street 1	585 POINT BROWN AVE NW	V	
	Street 2			
	City	OCEAN SHORES		
	State ("NA" if non-U.S. address)	WA		
	Zip/Postal Code	98569		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	COUNCILMEMBER, MAYOR	COUNCILMEMBER, MAYOR		
By Whom Appointed or Elected	CITIZENS OF OCEAN SHORES			
Interest Percentages	Voting	12.5%		
from 0.0 to 100.0) Total assets (Equity Debt Plus)				
Does interest holder have a that do not appear on this r	n attributable interest in one or eport?	r more broadcast stations	No	

Ownership Information			
FRN	9990149899		
Name	ERIC NOBLE		
Address	PO Box Street 1 585 POINT BROWN AVE NW		
	Street 2		
	City OCEAN SHORES		
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98569	
	Country (if non-U.S. address)	United States	

Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	COUNCILMEMBER	COUNCILMEMBER		
By Whom Appointed or Elected	CITIZENS OF OCEAN SHORES			
Interest Percentages	Voting 12.5%			
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)			
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No	

Ownership Information				
FRN	9990149900			
Name	BOB PETERSON	BOB PETERSON		
Address	РО Вох			
	Street 1	585 POINT BROWN AVE NW	1	
	Street 2			
	City	OCEAN SHORES		
	State ("NA" if non-U.S. address)	WA		
	Zip/Postal Code	98569		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	COUNCILMEMBER			
By Whom Appointed or Elected	CITIZENS OF OCEAN SHORES			
Interest Percentages	Voting	12.5%		
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)			
Does interest holder have a	an attributable interest in one oreport?	r more broadcast stations	No	

Ownership Information			
FRN	9990149901		
Name	KATHRYN SPRIGG		
Address	PO Box		
	Street 1	585 POINT BROWN AVE NW	

	Street 2		
	City	OCEAN SHORES	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98569	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	COUNCILMEMBER		
By Whom Appointed or Elected	CITIZENS OF OCEAN SHORES		
Interest Percentages	Voting 12.5%		
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one or report?	more broadcast stations	No

Ownership Information				
FRN	9990149902			
Name	ALISON CLINE	ALISON CLINE		
Address	PO Box			
	Street 1	585 POINT BROWN AVE NW		
	Street 2			
	City	OCEAN SHORES		
	State ("NA" if non-U.S. address)	WA		
	Zip/Postal Code	98569		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	COUNCILMEMBER			
By Whom Appointed or Elected	CITIZENS OF OCEAN SHORES			
Interest Percentages	Voting	12.5%		
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)			

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?	No
(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes

(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If "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 be attributed an interest.	

Certification

Section	Question	Response
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: MAYOR Exact Legal Title or Name of Respondent: CITY OF OCEAN SHORES Name: JON MARTIN Phone: 2064061914 04/01/2022