

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0001763788** | File Number: **0000088713** | Submit Date: **11/12/2019** | Call Sign: **WOOF-FM** | Facility ID: **73674** |
 City: **DOTHAN** | State: **AL**
 Service: **Full Power FM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **11/12/2019** | 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 Report License Renewal
Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
WOOF, INC. Doing Business As: WOOF, INC.	P. O. BOX 1427 DOTHAN, AL 36302 United States	+1 (334) 792-1149	lsimpson@997wooffm.com	COR

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Michael D. Holderfield CONSULTING ENGINEER Michael D. Holderfield	3865 County Road 203 Dothan , AL 36301 United States	+1 (334) 790- 8533	mholderfield@997wooffm. com	Technical Representative
David D Oxenford Partner Wilkinson Barker Knauer, LLP	1800 M Street, NW Suite 800N Washington, DC 20036 United States	+1 (202) 783- 4141	doxenford@wbklaw.com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
73674	WOOF-FM	DOTHAN	AL	No
73675	WOOF	DOTHAN	AL	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	Title
Katrina Leigh Simpson	President

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	11/12 /2019
Certified Title	President
Authorized Party Name	Katrina Leigh Simpson

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
2018-annual-eeo-public-file-report-20181130-165746820-doc (1).pdf	Applicant	EEO Public File Report	2018 EEO Public File Report	Done with Virus Scan and/or Conversion
2019- Annual EEO Public File Report (002).doc	Applicant	EEO Public File Report	2019 EEO Public File Report	Done with Virus Scan and/or Conversion
WOOF EEO Narrative Statement 4843-7664-1962 v.1.pdf	Applicant	Narrative Statement	WOOF EEO Narrative Statement	Done with Virus Scan and/or Conversion