

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0009860966** File Number: **0000105902** Submit Date: **02/12/2020** Call Sign: **WAUD** Facility ID: **3204** City:

AUBURN State: AL

Service: Full Power AM Purpose: EEO Report Status: Received Status Date: 02/12/2020 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.	Corrected EEO
Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
TIGER COMMUNICATIONS, INC. Doing Business As: TIGER	Brooke Myers, GM 2514 South College	+1 (334) 877- 9999	brooke@thetiger. fm	COR
COMMUNICATIONS, INC.	Street Auburn, AL 36832 United States			

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
John C Trent , Esq . COUNSEL	Jo 200 South Church	+1 (540) 459- 7646	fccman3@shentel.	Legal
Putbrese Hunsaker & Trent, P.	Street	7040	net	Representative
C.	WOODSTOCK, VA 22664			
	United States			

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
3204	WAUD	AUBURN	AL	No
68310	WQNR	TALLASSEE	AL	No
48682	WQSI	TUSKEGEE	AL	No
9782	WTGZ	UNION SPRINGS	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
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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
Thomas Haley	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	02/12 /2020
Certified Title	President
Authorized Party Name	Thomas Haley

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
eeo-2017-20180204-212045782- doc.pdf	Applicant	EEO Public File Report	EEO 2017- 2018	Done with Virus Scan and/or Conversion
eeo 2018 revised.Tiger.docx	Applicant	EEO Public File Report	Corrected EEO	Done with Virus Scan and/or Conversion
EEO NARRATIVE.docx	Applicant	Narrative Statement	EEO Narrative	Done with Virus Scan and/or Conversion