



(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0017011164** | File Number: **0000115616** | Submit Date: **06/01/2020** | Call Sign: **WNOC** | Facility ID: **176349** | City: **BOWLING GREEN** | State: **OH**
 Service: **Full Power FM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **06/01/2020** | 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.	OH1 Annunciation Radio EEO Program Report
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
OUR LADY OF GUADALUPE RADIO, INC., DBA ANNUNCIATION RADIO Doing Business As: ANNUNCIATION RADIO	David Vacheresse 3662 RUGBY DRIVE TOLEDO, OH 43614 United States	+1 (419) 385-0143	dave@annunciationradio.com	NFP

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Stuart W Nolan , Jr . Counsel LEGALWORKS APOSTOLATE, PLLC	Stuart W Nolan Jr, Esq 4 Family Life Lane Front Royal, VA 22630 United States	+1 (540) 622-8070	nolan@LegalWorks.com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
172338	WHRQ	SANDUSKY	OH	No
137442	WSHB	WILLARD	OH	No
92877	WFOT	LEXINGTON	OH	No
176349	WNOC	BOWLING GREEN	OH	No
175485	WRRO	EDON	OH	No

Program Report Questions

Section	Question	Response
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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?	Yes

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	06/01/2020
Certified Title	President
Authorized Party Name	David Vacheresse

Attachments

No Attachments.