

## Broadcast Equal Employment Opportunity Program Report

 FRN:
 0005032248
 File Number:
 0000128959
 Submit Date:
 12/01/2020
 Call Sign:
 WLOL
 Facility ID:
 42963
 City:

 MINNEAPOLIS
 State:
 MN

 Service:
 Full Power AM
 Purpose:
 EEO Report
 Status:
 Received
 Status Date:
 12/01/2020
 Filing Status:
 Active

General	Section	Question	Response	
Information	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.	WLOL - EEO Program Report for December 2020 Renewal	
	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
RELEVANT RADIO, INC.	Amy Vanden Langenberg 1496 Bellevue Street Suite 202 Green Bay, WI 54311 United States	+1 (920) 884-4160	avanden@relevantradio.com	NFP

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?

Contact	Contact Name	Address		Phone		Email		Contact Type
Representatives	Mark Denbo Counsel Smithwick & Belendiuk, P. C.	5028 Wiscons W. Suite 301 Washington, I United States		+1 (202) ( 9656	350-	mdenbo@fcc com	world.	Legal Representative
Common Stations	Facility Identifier 42963	Call Sign	<b>City</b> MINNEAPOL	IS	State MN	<b>Time Broke</b> No	erage Agr	reement
Program Report	Section	Question					Respor	ise
Questions	Discrimination Complaints	this license jurisdiction alleging un	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)?		etent cal law,	No		

**Full-time Employees** 

Yes

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	12/01 /2020
Certified Title	Executive Director
Authorized Party Name	Francis Hoffman

## Attachments

No Attachments.