

Broadcast Equal Employment Opportunity Program Report

 FRN:
 0007720287
 File Number:
 0000181301
 Submit Date:
 01/25/2022
 Call Sign:
 WWSE
 Facility ID:
 29919
 City:

 JAMESTOWN
 State:
 NY

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status Date:
 01/25/2022
 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.	Media One Group NY EEO Program Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee

Questions

Licensee Name, Type and Contact Information

Information

Applicant	Address	Phone	Email	Applicant Type
Media One Holdings, LLC	2000 Auburn Drive Suite 200 Beachwood, OH 44122 United States	+1 (216) 292-8113	JTEONE@MSN.COM	LLC

Contact Name Contact Type Address Phone Email Contact Representatives David D. Oxenford 1800 M Street, NW +1 (202) 783doxenford@wbklaw. Legal Wilkinson Barker Knauer, Suite 800N 4141 com Representative LLP Washington, DC 20036 United States **Facility Identifier** City Time Brokerage Agreement Call Sign State Common **Stations** WWSE 29919 JAMESTOWN NY No WKZA 48736 LAKEWOOD NY No WHUG 65591 JAMESTOWN NY No WKSN JAMESTOWN NY 65592 No 29922 WJTN JAMESTOWN NY No WQFX-FM RUSSELL PA No 39622 Program Report

t	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	full-time en	nployees? Consid	ent unit employ fewer than five der as "full-time" employees all 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						
	Andrew Hill		Genera	al Manager			
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					01/25 /2022	
	Certified Title					Manager	
	Authorized Party Name					James T. Embrescia	
Attachments	File Name	Uploaded By	Attachment Type	Description	Upload Status		
	Media One 2020-2021 EEO Report.pdf		EEO Public File Report	Media One 2020-2021 EEO Annual Report	Done with Virus /or Conversion	Scan and	
	<u>Media One 2021-2022 EEO</u> <u>Report.pdf</u>	_ Applicant	EEO Public File Report	Media One 2021-2022 EEO Report	Done with Virus Scan and /or Conversion		
	Media One EEO Narrative	Applicant	Narrative	Media One EEO Narrative	Done with Virus Scan and		

Statement

Statement.pdf

Statement

/or Conversion