

(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0022354393** | File Number: **0000082944** | Submit Date: **09/30/2019** | Call Sign: **WQHL-FM** | Facility ID: **15871** |  
 City: **LIVE OAK** | State: **FL**  
 Service: **Full Power FM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **09/30/2019** | 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.	WQHL-FM Renewal EEO 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
<b>SOUTHERN COMMUNICATIONS, LLC</b> Doing Business As: SOUTHERN COMMUNICATIONS, LLC	1410 LPGA Blvd. Suite 148 DAYTONA BEACH, FL 32117 United States	+1 (386) 255-9300	paulstone@southernbroadcasting.com	LLC

## Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Scott Woodworth Edinger Associates PLLC	1725 I Street, NW Suite 300 Washington, DC 20006 United States	+1 (202) 747-1694	swoodworth@edingerlaw.net	Legal Representative

## Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
15871	WQHL-FM	LIVE OAK	FL	No
9033	WCJX	FIVE POINTS	FL	No
15872	WQHL	LIVE OAK	FL	No
48644	WXHT	MADISON	FL	No
37060	WJZS	LIVE OAK	FL	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
Dean Blackwell	

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	09/30 /2019
Certified Title	Member
Authorized Party Name	Paul Stone

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<a href="#">2016_2017EEO.pdf</a>	Applicant	EEO Public File Report	2016-2017 EEO Public File Report	Done with Virus Scan and/or Conversion
<a href="#">2017-18.pdf</a>	Applicant	EEO Public File Report	2017-18 EEO Public File Report	Done with Virus Scan and/or Conversion
<a href="#">General EEO Policy.pdf</a>	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and/or Conversion