

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0017998352** | File Number: **0000123427** | Submit Date: **10/01/2020** | Call Sign: **WNBW-DT** | Facility ID: **83965**
 City: **GAINESVILLE** | State: **FL**
 Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **10/01/2020** | Filing Status: **Active**

General Information

Section	Question	Response
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
MPS MEDIA OF GAINESVILLE LICENSE, LLC Doing Business As: MPS MEDIA OF GAINESVILLE LICENSE, LLC	1181 HIGHWAY 315 WILKES BARRE, PA 18702 United States	+1 (570) 970-5600	genebrownsc@gmail.com	LLC

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Daniel A Kirkpatrick , Esq . FLETCHER, HEALD & HILDRETH, P.L.C.	1300 NORTH 17TH STREET 11TH FLOOR ARLINGTON, VA 22209 United States	+1 (703) 812-0432	kirkpatrick@fhhlaw.com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
83965	WNBW-DT	GAINESVILLE	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?	Yes

Certification

Question	Response
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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	10/01 /2020
Certified Title	Sole Member
Authorized Party Name	Eugene Brown

Attachments

No Attachments.