

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0004934246** | File Number: **0000206906** | Submit Date: **01/13/2023** | Call Sign: **WVH-CD** | Facility ID: **70158**
 City: **SOUTHAMPTON** | State: **NY**
 Service: **Digital Class A** | Purpose: **EEO Report** | Status: **Received** | Status Date: **01/13/2023** | 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
Video Voice, Inc. Doing Business As: WVH-TV	Ernest Schimizzi PO Box 769 Wainscott, NY 11975 United States	+1 (917) 559-3323	wvhtv@aol.com	COR

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Clarence M. Beverage BROADCAST ENGINEERING CONSULTANT Communications Technologies, Inc.	Clarence Beverage PO Box 1130 Marlton, NJ 08053 United States	+1 (609) 451-5296	cbeverage@commtechrf.com	Technical Representative
David D. Burns , Esq . Counsel Lerman Senter, PLLC	David D. Burns 2001 L Street NW Suite 400 Washington, DC 20036 United States	+1 (202) 429-8970	dburns@lermansenter.com	Legal Representative
Ernest J. Schimizzi President and General Manager Video Voice., Inc. P.O. Box 769 Wainscott, New York 11975-0769	Ernest J. Schimizzi PO Box 769 Wainscott, NY 11975 United States	+1 (917) 559-3323	wvh@aol.com	Technical Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
70158	WVH-CD	SOUTHAMPTON	NY	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
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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	01/13 /2023
Certified Title	President and General Manager
Authorized Party Name	Ernest J. Schimizzi

Attachments

No Attachments.