



777 High Street, Suite 300
Eugene, OR 97401-2787

Mailing: P.O. Box 10747
Eugene, OR 97440-2747

Phone: 541-484-9292 / Fax: 541-343-1206
Email: dmonahan@luvaascobb.com

J. Dominic Monahan
Attorney at Law

September 10, 2013

Spencer Absersold, Station Manager
Station KGHP(FM)
14015 62nd Avenue NW
Gig Harbor, WA 89329

VIA E-MAIL

RE: License Renewal on File

Dear Spencer:

On September 10, 2013 the renewal application for Station KGHP, including FM Translators K207AZ and K229BL, was filed, along with the Broadcast Equal Opportunity Program Report. The biennial Ownership Report for Peninsula School District No. 401 was also filed. Copies of those filings are enclosed for the public inspection files.

Now that the renewal applications for KGHP is on file, there is also a post-filing publication requirement. The station must air six further announcements which confirm the renewal is on file and that the public has an opportunity to comment. The announcements must be aired on the 1st and 16th of each calendar month. At least three of these **post-filing** announcements must be made during morning (7-9 a.m.) and afternoon (4-6 p.m.) drive times; at least one should run between 9:00 a.m. to noon; at least one should run between noon and 4:00 p.m. and at least one between 7 p.m to Midnight. If the station does not operate between 7 am to 9 am or 4pm to 6-m, then at least three of the required announcements should air during the first two hours of operation.

Copies of the post-filing announcements and certification (which covers both the pre-and post-filing announcements) are attached. Please give me a call if you have any questions about these announcements.

Best personal regards.

Cordially yours,

J. DOMINIC MONAHAN

JDM/nlk

Enclosures

cc: JB Fitzpatrick (w/enclosures)
Judy Williamson (w/enclosures)

**STATION KGHP AND
FM TRANSLATORS K207AZ and K229BL**

On January 26, 2006, Peninsula School District No. 401 was granted a license by the Federal Communications Commission for KGHP(FM) and FM Translators K207AZ and K229BL to serve the public interest as a public trustee until February 1, 2014.

Our license will expire on February 1, 2014. We have filed an application for renewal with the FCC.

A copy of this application is available for public inspection during our regular business hours. It contains information concerning this station's performance during the last eight years.

Individuals who wish to advise the FCC of facts relating to our renewal application and to whether this station has operated in the public interest should file comments and petitions with the FCC by January 2, 2014.

Further information concerning the FCC'S broadcast license renewal process is available at [*address of location of the station's public inspection file (street; city/state)*] or may be obtained from the FCC, Washington, D.C. 20554.

CERTIFICATION

To WHOM IT MAY CONCERN:

This will certify that publication of the notice required by §73.3580 of the Rules of the Federal Communications Commission concerning the filing of an application for the renewal of license of Station KGHP(FM), Gig Harbor, Washington, and FM Translator K207AZ and K229BL, also in Gig Harbor, Washington was completed by broadcast of the required pre-filing and post-filing notices over the facilities of the station as follows:

Station KGHP(FM); FM Translator K207AZ; K229BL

Pre-Filing:

_____ a.m./p.m.
_____, _____ a.m./p.m.
_____, _____ a.m./p.m.
_____ a.m./p.m.

Post-Filing

_____ a.m./p.m.
_____, _____ a.m./p.m.
_____, _____ a.m./p.m.
_____, _____ a.m./p.m.
_____, _____ a.m./p.m.
_____, _____ a.m./p.m.

A copy of the text of the notices as broadcast is attached hereto.

PENINSULA SCHOOL DISTRICT No. 401

Wendy Wojtanowicz, Board President

Federal Communications Commission

FCC MB - CDBS Electronic Filing

Account number: 677748

Description: KGHP + FM TRANSLATORS K207AZ + K229BL [RENEWALS 2013]

Application Reference Number: 20130910ADB

Successfully filed at Sep 10 2013 7:09PM

Based on the information supplied, no fee is required.

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Federal Communications Commission Washington, D.C. 20554 <p style="text-align: center;">FCC 303-S</p>	Approved by OMB 3060-0110 (March 2011)	FOR FCC USE ONLY
<p>APPLICATION FOR RENEWAL OF BROADCAST STATION LICENSE</p> <p>Read INSTRUCTIONS Before Filling Out Form</p>		FOR COMMISSION USE ONLY FILE NO. - 20130910ADB

Section I - General Information- TO BE COMPLETED BY ALL APPLICANTS

1.	Legal Name of the Licensee PENINSULA SCHOOL DISTRICT NO. 401						
	Mailing Address 14015 62ND AVENUE, N.W.						
	City GIG HARBOR	State or Country (if foreign address) WA	ZIP Code 98332 -				
	Telephone Number (include area code) 2538576171	E-Mail Address (if available) ABERSOLDS@PSD401.NET					
	FCC Registration Number: 0000010256	Facility ID Number 52167	Call Sign KGHP				
2.	Contact Representative J. DOMINIC MONAHAN						
	Firm or Company Name LUVAAS COBB						
	Mailing Address 777 HIGH STREET SUITE 300						
	City EUGENE	State or Country (if foreign address) OR	Zip Code 97440 - 2787				
	Telephone Number (include area code) 5414849292	E-Mail Address (if available) DMONAHAN@LUVAASCOBB.COM					
3.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input checked="" type="radio"/> Noncommercial Educational License <input type="radio"/> Other <input type="radio"/> N/A (Fee Required)						
4.	Purpose of Application <input checked="" type="radio"/> Renewal of license <input type="radio"/> Amendment to pending renewal application If an amendment, submit as an exhibit a listing by Section and Item Number the portions of the [Exhibit 1] pending application that are being revised.						
5.	Facility Information: <input type="radio"/> Commercial <input checked="" type="radio"/> Noncommercial Educational						
6.	Service and Community of License a. <input type="radio"/> AM <input checked="" type="radio"/> FM <input type="radio"/> FM Translator <input type="radio"/> LPFM <input type="radio"/> TV Translator <input type="radio"/> Low Power TV <input type="radio"/> Class A TV <input type="radio"/> Digital TV <input type="radio"/> Digital Translator or Digital LPTV <input type="radio"/> Digital Class A TV <table border="1" style="width:100%; margin-top: 5px;"> <tr> <td colspan="2" style="text-align: center;">Community of License /Area to be Served</td> </tr> <tr> <td style="width:50%;">City: GIG HARBOR</td> <td style="width:50%;">State : WA</td> </tr> </table> b. Does this application include one or more FM translator station(s), or TV translator station(s), LPTV station(s), in addition to the station listed in Section I question 1? (The callsign(s) of any associated FM translators, TV translators or LPTV stations will be requested in Section V). <input checked="" type="radio"/> Yes <input type="radio"/> No			Community of License /Area to be Served		City: GIG HARBOR	State : WA
Community of License /Area to be Served							
City: GIG HARBOR	State : WA						
7.	[Empty field]						

Other Authorizations. List call signs, facility identifiers and location(s) of any FM booster or TV booster station(s) for which renewal of license is also requested.	[Exhibit 2]	<input checked="" type="checkbox"/> N/A
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NOTE: In addition to the information called for in Sections II, III, IV and V, an explanatory exhibit providing full particulars must be submitted for each item for which a "No" response is provided.

Section II - Legal - TO BE COMPLETED BY ALL APPLICANTS

1.	Certification. Licensee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application, instructions and worksheets.	<input checked="" type="radio"/> Yes <input type="radio"/> No
2.	Character Issues. Licensee certifies that the neither the licensee nor any party to the application has or has had any interest in, or connection with:	
a.	any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or party to the application; or	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 3]
b.	any pending broadcast application in which character issues have been raised.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 4]
3.	Adverse Findings. Licensee certifies that, with respect to the licensee and each party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any laws related to the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination.	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 5]
4.	FCC Violations during the Preceding License Term. Licensee certifies that, with respect to the station(s) for which renewal is requested, there have been no violations by the licensee of the Communications Act of 1934, as amended, or the rules or regulations of the Commission during the preceding license term. If No, the licensee must submit an explanatory exhibit providing complete descriptions of all violations.	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 6]
5.	Alien Ownership and Control. Licensee certifies that it complies with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments.	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 7]
6.	Anti-Drug Abuse Act Certification. Licensee certifies that neither licensee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.	<input type="radio"/> Yes <input type="radio"/> No
7.	Non-Discriminatory Advertising Sales Agreements. Commercial licensee certifies that its advertising sales agreements do not discriminate on the basis of race or ethnicity and that all such agreements held by the licensee contain nondiscrimination clauses. Noncommercial licensees should select "not applicable."	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A See Explanation in [Exhibit 8]

I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations. I hereby waive any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and request an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)

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Typed or Printed Name of Person Signing WENDY WOJTANOWICZ	Typed or Printed Title of Person Signing BOARD PRESIDENT
Signature	Date 9/10/2013

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Section III - TO BE COMPLETED BY AM and FM LICENSEES ONLY

1.	Biennial Ownership Report: Licensee certifies that the station's Biennial Ownership Report (FCC Form 323 or 323-E) has been filed with the Commission as required by 47 C.F.R. Section 73.3615.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 9]
2.	EEO Program: Licensee certifies that:	
	a. The station's Broadcast EEO Program Report (FCC Form 396) has been filed with the Commission, as required by 47 C.F.R. Section 73.2080(f)(1). Specify FCC Form 396 File Number : B396 - 20130910ADA	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 10]
	b. The station has posted its most recent Broadcast EEO Public File Report on the station's website, as required by 47 C.F.R. Section 73.2080(c)(6).	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A See Explanation in [Exhibit 11]
3.	Local Public File. Licensee certifies that the documentation, required by 47 C.F.R. Section 73.3526 or 73.3527, as applicable, has been placed in the station's public inspection file at the appropriate times.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 12]
4.	Adherence to Minimum Operating Schedule. Licensee certifies that, during the preceding license term, the station has not been silent (or operating for less than its prescribed minimum operating hours) for any period of more than 30 days. If No, submit an Exhibit specifying the exact dates in the preceding license term on which the station was silent or operating for less than its prescribed minimum hours.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 13]
5.	Discontinued Operations. Licensee certifies that during the preceding license term, the station has not been silent for any consecutive 12-month period.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 14]
6.	Silent Station Licensee certifies that the station is currently on the air broadcasting programming intended to be received by the public.	<input checked="" type="radio"/> Yes <input type="radio"/> No
7.	Environmental Effects. Licensee certifies that the specified facility complies with the maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments. By checking "Yes" above, the licensee also certifies that it, in coordination with other users of the site, will reduce power or cease operation as necessary to protect persons having access to the site, tower, or antenna from radio frequency electromagnetic exposure in excess of FCC guidelines.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 15]
8.	Radio/Newspaper Cross-Ownership. Licensee certifies that neither the applicant nor any party to this application has an attributable interest in a newspaper which: (1) is published four or more days per week, (2) is in the dominant language in the market, and (3) is published in a	

community entirely encompassed by:	
a. the 1 mV/m contour of one of the FM station(s)?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
b. the 2 mV/m contour of one of the AM station(s)?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
If No to either Question 8.a or 8.b, has the Commission made a finding pursuant to Section 310 (d) of the Communications Act that the newspaper/broadcast combination is in the public interest?	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 16]

Section V - TO BE COMPLETED BY FM AND TV TRANSLATOR AND LOW POWER TV LICENSEES ONLY

1. and 2. [Station Info and Status]			
Low Power Applicants: Answer Question 2a only.			
1. Station Information:			
Call Sign	Facility Identifier	Area Licensed to Serve	
K207AZ	52166	City:GIG HARBOR	State:WA
2. Operational Status:			
a. Silent Station: Licensee certifies that the station is currently on the air.	<input checked="" type="radio"/> Yes <input type="radio"/> No		
b. Rebroadcast Status: Licensee certifies that the station is currently rebroadcasting the signal of an FM, AM, TV or LPTV station.	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A		
If Yes, identify the station being broadcast:			
Call Sign	Facility Identifier	Area Licensed to Serve	
KGHP	52167	City:GIG HARBOR	State:WA
c. Rebroadcast Consent: Licensee certifies that it has obtained written authority from the licensee of the primary station identified above for retransmitting primary station's programming.	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A		
1. Station Information:			
Call Sign	Facility Identifier	Area Licensed to Serve	
K229BL	86946	City:GIG HARBOR	State:WA
2. Operational Status:			
a. Silent Station: Licensee certifies that the station is currently on the air.	<input checked="" type="radio"/> Yes <input type="radio"/> No		
b. Rebroadcast Status: Licensee certifies that the station is currently rebroadcasting the signal of an FM, AM, TV or LPTV station.	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A		
If Yes, identify the station being broadcast:			
Call Sign	Facility Identifier	Area Licensed to Serve	
KGHP	52167	City:GIG HARBOR	State:WA
c. Rebroadcast Consent: Licensee certifies that it has obtained written authority from the licensee of the primary station identified above for retransmitting primary station's	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A		

programming.	
Additional Translator Info [Exhibit 33]	
3. For FM Translator Applicants Only:	
a. Licensee certifies that it is in compliance with 47 C.F.R. Section 74.1232(d), which: (1) prohibits the common ownership of a commercial primary FM station and a FM translator station whose coverage contour extends beyond the protected contour of the commercial FM primary station being broadcast, and (2) requires that the FM translator's entire 60 dBu contour is contained within the lesser of: (a) the 2 mV/m daytime contour of the AM primary station being rebroadcast, or (b) a 25-mile radius centered at the AM primary station's transmitter site. (With regard to (1), this restriction also applies to any person or entity having any interest in, or any connection with, the primary FM station.)	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A See Explanation in [Exhibit 34]
b. Licensee certifies that it is in compliance with 47 C.F.R. Section 74.1232(e) which prohibits an FM translator station whose coverage contour extends beyond the protected contour of the commercial primary station being rebroadcast from receiving any support (except for specified technical assistance), before, during or after construction, directly or indirectly, from the primary station or any person or entity having any interest in, or any connection with, the primary station.	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A See Explanation in [Exhibit 35]
4. For Low Power TV Applicants Only: Licensee certifies that it has filed with the Commission, the station's Broadcast EEO Program Report (FCC Form 396) and has posted the most recent Public File report on the station's website, if required by 47 C.F.R. Section 73.2080(f)(1).	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A See Explanation in [Exhibit 36]
5. Environmental Effects. Licensee certifies that the specified facility complies with the maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments. By checking "Yes" above, the licensee also certifies that it, in coordination with other users of the site, will reduce power or cease operation as necessary to protect persons having access to the site, tower or antenna from radio frequency electromagnetic exposure in excess of FCC guidelines.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 37]

Exhibits

Federal Communications Commission

FCC MB - CDBS Electronic Filing

Account number: 677748

**Description: PENINSULA SCHOOL DISTRICT BROADCAST EEO PROGRAM
REPORT**

Application Reference Number: 20130910ADA

Successfully filed at Sep 10 2013 6:50PM

Based on the information supplied, no fee is required.

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Federal Communications Commission Washington, D.C. 20554 <p style="text-align: center;">FCC 396</p>	Approved by OMB 3060-0113 (March 2003) FOR FCC USE ONLY
<p>BROADCAST EQUAL EMPLOYMENT OPPORTUNITY PROGRAM REPORT (To be filed with broadcast license renewal application)</p> <p>Read INSTRUCTIONS Before Filling Out Form</p>	FOR COMMISSION USE ONLY FILE NO. - 20130910ADA

Section I

Legal Name of the Licensee PENINSULA SCHOOL DISTRICT NO. 401		
Mailing Address 14015 62ND AVENUE, N.W.		
City GIG HARBOR	State or Country (if foreign address) WA	Zip Code 98332 -
Telephone Number (include area code) 2538576171		E-Mail Address (if available) ABERSOLDS@PSD401.NET
Facility ID Number 52167		Call Sign KGHP
TYPE OF BROADCAST STATION: (if applicable)	Commercial Broadcast Station <input type="radio"/> Radio <input type="radio"/> TV <input type="radio"/> Low Power TV <input type="radio"/> International	Noncommercial Broadcast Station <input checked="" type="radio"/> Educational Radio <input type="radio"/> Educational TV

Application Purpose

New Program Report

Amendment to Program Report

List call sign and location of all stations included on this statement. List commonly owned stations that share one or more employees. Also list stations operated by the licensee pursuant to a time brokerage agreement. Indicate on the table below which stations are operated pursuant to a time brokerage agreement. To the extent that licensees include stations operated pursuant to a time brokerage agreement on this report, responses or information provided in Sections I through II should take into consideration the licensee's EEO compliance efforts at brokered stations, as well as any other stations, included on this form. For purposes of this form, a station employment unit is a station or a group of commonly owned stations in the same market that share at least one employee.

[Stations Locations]

Station List

List call sign and location of all stations included on this statement. List commonly owned stations that share one or more employees. Also list stations operated by the licensee pursuant to a time brokerage agreement. Indicate on the table below which stations are operated pursuant to a time brokerage agreement. To the extent that licensees include stations operated pursuant to a time brokerage agreement on this report, responses should take into consideration the licensee's EEO compliance efforts at brokered stations, as well as any other stations, included on this form. For purposes of this form, a station employment unit is a station or a group of commonly owned stations in the same market that share at least one employee.

Call Sign	Facility ID Number	Type (check applicable box)	Location (City/State)	Time Brokerage Agreement (check applicable box)
KGHP	52167	<input type="radio"/> AM <input checked="" type="radio"/> FM <input type="radio"/> TV	GIG HARBOR, WA	<input type="radio"/> Yes <input checked="" type="radio"/> No

CONTACT PERSON IF OTHER THAN LICENSEE

Name J. DOMINIC MONAHAN		Street Address 777 HIGH STREET SUITE 300	
City EUGENE	State OR	Zip Code 97440-2787	Telephone Number 5414849292

FILING INSTRUCTIONS

Broadcast station licensees are required to afford equal employment opportunity to all qualified persons and to refrain from discriminating in employment and related benefits on the basis of race, color, national origin, religion, and sex. See 47 C.F.R. Section 73.2080. Pursuant to these requirements, a license renewal applicant whose station employment unit employs five or more full-time station employees must file a report of its activities to ensure equal employment opportunity. If a station employment unit employs fewer than five full-time employees, no equal employment opportunity program information need be filed. If a station employment unit is filing a combined report, a copy of the report must be filed with each station's renewal application.

A copy of this report must be kept in the station's public file. These actions are required to obtain license renewal. Failure to meet these requirements may result in sanctions or license renewal being delayed or denied. These requirements are contained in 47 C.F.R. Section 73.2080 and are authorized by the Communications Act of 1934, as amended.

DISCRIMINATION COMPLAINTS. Have any pending or resolved complaints been filed during Yes No 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)?

If so, provide a brief description of the complaint(s), including the persons involved, the date of the filing, the court or agency, the file number (if any), and the disposition or current status of the matter.

[Exhibit 1]

Does your station employment unit employ fewer than five full-time employees? Yes No

Consider as "full-time" employees all those permanently working 30 or more hours a week.

If your station employment unit employs fewer than five full-time employees, complete the certification below, return the form to the FCC, and place a copy in your station(s) public file. You do not have to complete the rest of this form. If your station employment unit employs five or more full-time employees, you must complete all of this form and follow all instructions.

CERTIFICATION.

This report must be certified, as follows:

- A. By licensee, if an individual;
- B. By a partner, if a partnership (general partner, if a limited partnership);
- C. By an officer, if a corporation or an association; or
- D. By an attorney of the licensee, in case of physical disability or absence from the United States of the licensee.

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

I certify to the best of my knowledge, information and belief, all statements contained in this report are true and correct.

Signed	Name of Respondent
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	WENDY WOJTANOWICZ
Title BOARD PRESIDENT	Telephone No. (include area code) 2538576171
Date 9/10/2013	

The purpose of this document is to provide broadcast licensees, the FCC, and the public with information about whether the station is meeting equal employment opportunity requirements.

GENERAL POLICY

A broadcast station must provide equal employment opportunity to all qualified individuals without regard to their race, color, national origin, religion or sex in all personnel actions including recruitment, evaluation, selection, promotion, compensation, training and termination.

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:
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It is also the responsibility of all persons at a broadcast station making employment decisions with respect to recruitment, evaluation, selection, promotion, compensation, training and termination of employees to ensure that no person is discriminated against in employment because of race, color, religion, national origin or sex.

I. EEO PUBLIC FILE REPORT Attach as an exhibit one copy of each of the EEO public file reports from the previous two years. Stations are required to place annually such information as is required by 47 C.F.R. Section 73.2080 in their public files.	[Exhibit 2]
II. NARRATIVE STATEMENT Provide a statement in an exhibit which demonstrates how the station achieved broad and inclusive outreach during the two-year period prior to filing this application. Stations that have experienced difficulties in their outreach efforts should explain.	[Exhibit 3]

FCC NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this report. We will use the information you provide to determine if the benefit requested is consistent with the public interest. If we believe there may be a violation or potential violation of a FCC statute, regulation, rule or order, your request may be referred to the Federal, state or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your request may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party to a proceeding before the body or has an interest in the proceeding. In addition, all information provided in this form will be available for public inspection. If you owe a past due debt to the federal government, any information you provide may also be disclosed to the Department of Treasury Financial Management Service, other federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide this information to these agencies through the matching of computer records when authorized. We have estimated that each response to this collection of information will average 5 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-0113), Washington, D. C. 20554. We will also accept your comments via the Internet if you send them to jboley@fcc.gov. Remember - you are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0113.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, P.L. 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3), AND THE PAPERWORK REDUCTION ACT OF 1995, P.L. 104-13, OCTOBER 1, 1995, 44 U.S.C. 3507.

Exhibits

Federal Communications Commission

FCC MB - CDBS Electronic Filing
Account number: 677748

**Description: BIENNIAL OWNERSHIP REPORT FOR PENINSULA SCHOOL
DISTRICT 401**

Application Reference Number: 20130910ADE
Successfully filed at Sep 10 2013 7:11PM

Based on the information supplied, no fee is required.

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Federal Communications Commission Washington, D.C. 20554 <p style="text-align: center;">FCC 323-E</p>	Approved by OMB 3060-0084 (June 2002) FOR FCC USE ONLY
<p>Ownership Report For Noncommercial Educational Broadcast Station</p> <p>Read INSTRUCTIONS Before Filling Out Form</p>	FOR COMMISSION USE ONLY FILE NO. - 20130910ADE

Section I - General

1.	Legal Name of the Licensee/Permittee PENINSULA SCHOOL DISTRICT NO. 401		
	Mailing Address 14015 62ND AVENUE, N.W.		
	City GIG HARBOR	State or Country (if foreign address) WA	ZIP Code 98332 -
	Telephone Number (include area code) 2538576171	E-Mail Address (if available) ABERSOLDS@PSD401.NET	
	FCC Registration Number: 0000010256	Call Sign KGHP	Facility ID Number 52167
2.	Contact Representative (if other than Licensee/Permittee) J. DOMINIC MONAHAN		
	Firm or Company Name LUVAAS COBB		
	Mailing Address 777 HIGH STREET SUITE 300		
	City EUGENE	State or Country (if foreign address) OR	ZIP Code 97440 - 2787
	Telephone Number (include area code) 5414849292	E-Mail Address (if available) DMONAHAN@LUVAASCOBB.COM	
3.	Name of entity, if other than licensee or permittee, for which report is filed FILED FOR LICENSEE		
	Mailing Address		
	City	State or Country (if foreign address)	ZIP Code
	Telephone Number (include area code)	E-Mail Address (if available)	

Section II - Ownership Information

4.	All of the information furnished in this Report is accurate as of 9/9/2013 <i>(Date must comply with 47 C.F.R. Section 73.3615(d), i.e., information must be current within 60 days of filing of this report, when 4(a) below is checked.)</i> This Report is filed for <i>(check one)</i> a. <input checked="" type="radio"/> Biennial b. <input type="radio"/> Transfer of Control or Assignment of License/Permit c. <input type="radio"/> Other d. <input type="radio"/> Amendment to pending application
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for the following stations:

[Enter Station Information]

Station List

This Report is filed for the following stations:

Call Letters	Facility ID Number	Location (City/State)	Class of service
KGHP	52167	GIG HARBOR WA	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
K229BL	86946	GIG HARBOR WA	TX

Call Letters	Facility ID Number	Location (City/State)	Class of service
K207AZ	52166	GIG HARBOR WA	TX

5. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

[Enter Contract/Instrument Information]

6. Is the governing board directly or indirectly under the control of another entity? Yes No
 If Yes, is a separate FCC Form 323-E submitted for such entity? Yes No

7. List officers, members of governing board, and holders of 1% or more ownership interest, if any. Use one column for each individual or entity. Attach supplemental pages, if necessary.

[Enter Owner Information]

Owner Information

List officers, members of governing board, and holders of 1% or more ownership interest, if any. Use one column for each individual or entity. Attach supplemental pages if necessary.

(Read carefully - The numbered items below refer to line numbers in the following table.)

- a. Name and address of officer, member of governing board, and holders of 1% or more ownership interest (if other than individual also show name, address and citizenship of natural person authorized to vote the interest). List officers first, then board members, and thereafter, holders of 1% or more ownership interest, if any.
- b. Citizenship.
- c. Office held.
- d. Percent of interest held.
- e. Principal profession or occupation.
- f. By whom appointed or elected.
- g. Existing interests in any other broadcast station, including the nature and size of such interests.

a. Name and Address.	JILL UDDENBERG, 45 RAFT ISLAND DRIVE NW, GIG HARBOR, WA 98335
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b. Citizenship.	US
c. Office held.	PRESIDENT; BOARD MEMBER
d. Percent of interest held.	0.00
e. Principal profession or occupation.	INSURANCE AGENT
f. By whom appointed or elected.	PUBLICLY ELECTED
g. Existing interests	BOARD MEMBER; NO OWNERSHIP INTEREST

a. Name and Address.	MATTHEW WILKINSON, 2823 204TH AVENUE KPS, LAKEBAY, WA 98349
b. Citizenship.	US
c. Office held.	VICE PRESIDENT; DIRECTOR
d. Percent of interest held.	0.00
e. Principal profession or occupation.	COMPUTER TECHNICIAN
f. By whom appointed or elected.	PUBLICLY ELECTED
g. Existing interests	BOARD MEMBER; NO OWNERSHIP INTEREST

a. Name and Address.	WENDY WOJTANOWICZ, 12303 98TH AVENUE CT. NW, GIG HARBOR, WA 98329
b. Citizenship.	US
c. Office held.	DIRECTOR
d. Percent of interest held.	0.00
e. Principal profession or occupation.	BOOK REPRESENTATIVE
f. By whom appointed or elected.	PUBLICLY ELECTED
g. Existing interests	BOARD MEMBER; NO OWNERSHIP INTEREST

a. Name and Address.	RAND WILHELMSSEN, 3225 GRANDVIEW STREERT, GIG HARBOR, WA 98335
b. Citizenship.	US
c. Office held.	DIRECTOR
d. Percent of interest held.	0.00
e. Principal profession or occupation.	BANKER
f. By whom appointed or elected.	PUBLICLY ELECTED
g. Existing interests	BOARD MEMBER; NO OWNERSHIP INTEREST

a. Name and Address.	RICK JONES. 4334 MURPHY DRIVE, GIG HARBOR, WA 98335
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