

## Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0006220727
 File Number:
 0000079760
 Submit Date:
 08/01/2019
 Call Sign:
 WKVS
 Facility ID:
 22015
 City:

 LENOIR
 State:
 NC

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 Date:
 08/01/2019
 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.	Foothills Radio Group, LLC - 2019 Broadcast EEO Program Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

## Licensee Information

**Program Report** 

Questions

Applicant	Address	Phone	Email	Applicant Type
Foothills Radio Group, LLC Doing Business As: Foothills Radio Group, LLC	c/o Brooks, Pierce, et al. 150 Fayetteville Street, Suite 1700 Raleigh, NC 27601 United States	+1 (919) 839- 0300	cramsey@brookspierce. com	LLC

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	Coe W. Ramsey Legal Representative Brooks, Pierce, et al.	PO Box 1800 Raleigh, NC 27602 United States	+1 (919) 839-0300	cramsey@brookspierce.com	Legal Representative

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	73149	WJRI	LENOIR	NC	No
	22015	WKVS	LENOIR	NC	No
	22915	WKGX	LENOIR	NC	No

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

Additional Program Report Questions	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	Title	
	Donald W. Curtis	Member		
Contification	Question		Response	
Certification	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		08/01 /2019	
	Certified Title		Member and Manager	
	Authorized Party Name		Donald W. Curtis	

## Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
2018 EEO Public File	Applicant	EEO Public File	2018 EEO Public File	Done with Virus Scan and/or
Report.pdf		Report	Report	Conversion
2019 EEO Public File	Applicant	EEO Public File	2019 EEO Public File	Done with Virus Scan and/or
Report.pdf		Report	Report	Conversion
EEO Narrative Exhibit.pdf	Applicant	All Purpose	2019 EEO Narrative Exhibit	Done with Virus Scan and/or Conversion