

## Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

FRN: <b>00347</b>	67822 F	ile Number: 0000091646	Submit Date: 11/27/2	2019 Call Sign: WSTR	Facility ID: 30822 City:
SMYRNA	State: GA				
Service: Full	Power FM	Purpose: EEO Report	Status: Received	Status Date: 11/27/2019	Filing Status: Active

General	Section	Question	Response	
Information	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.	Entercom Atlanta EEO Program Report (Dec. 2019)	
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes	

## Licensee Information

Applicant	Address	Phone	Email	Applicant Type
ENTERCOM LICENSE, LLC	2400 MARKET STREET 4TH FLOOR PHILADELPHIA, PA 19103 United States	+1 (610) 660- 5610	ANDREW.SUTOR@ENTERCOM. COM	LLC

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	Laura M Berman Senior Counsel ENTERCOM COMMUNICATIONS CORP.	2400 Market Street 4th Floor Philadelphia, PA 19103 United States	+1 (484) 270- 6312	LAURA. BERMAN@ENTERCOM.COM	Legal Representative

Common	
Stations	

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
30822	WSTR	SMYRNA	GA	No
63776	WVEE	ATLANTA	GA	No
63775	WAOK	ATLANTA	GA	No
13805	WZGC	ATLANTA	GA	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)?	Yes

	Full-time Employees	Does your station employn full-time employees? Cons those permanently working	ider as "full-time" em	oloyees all	No		
Additional Program Report Questions	<b>Responsibility for Impler</b> A broadcast station must assig official's name and title are:		esponsibility for equal	employment o	pportunity at the st	ation. That	
	Name Rick Caffey	<b>Title</b> SVP Marke	et Manager				
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					11/27 /2019	
	Certified Title					Executive Vice President	
	Authorized Party Name					Andrew P. Sutor , IV .	
Attachments	File Name	Uploaded By	Attachment Type	Description	Upload Status		
	<u>Atlanta 2017-2018 EEO Publ</u> pdf	ic File Report. Applicant	EEO Public File Report		Done with Virus S Conversion	Scan and/or	
	Atlanta EEO Program Report	<u>Exhibit.pdf</u> Applicant	All Purpose		Done with Virus S Conversion	Scan and/or	
	Entercom Atlanta 2018-2019 File Report.pdf	EEO Public Applicant	EEO Public File Report		Done with Virus S Conversion	Scan and/or	