

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0018346163** | File Number: **0000098529** | Submit Date: **01/21/2020** | Call Sign: **KAFN** | Facility ID: **4839** | City: **BENTON** | State: **AR**
 Service: **Full Power AM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **01/21/2020** | 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.	EEO PROGRAM REPORT
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
HIGH PLAINS RADIO NETWORK, LLC Doing Business As: HIGH PLAINS RADIO NETWORK, LLC	Monte Spearman 3218 QUINCY STREET PLAINVIEW, TX 79072 United States	+1 (806) 777-8542	MONTE@HPRNETWORK.COM	Company

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
GARY GRAHAM GARY GRAHAM BROADCAST ENGINEERING	GARY GRAHAM PO BOX 3030 WEATHERFORD, TX 76086 United States	+1 (979) 255-3615	GGBCSTE@AOL.COM	Technical Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
24734	KVRC	ARKADELPHIA	AR	No
162375	KJMT	CALICO ROCK	AR	No
4839	KAFN	BENTON	AR	No
52416	KYXK	GURDON	AR	No
183370	KWPS-FM	CADDO VALLEY	AR	No
166081	KCMC-FM	VIOLA	AR	No
24733	KDEL-FM	ARKADELPHIA	AR	No
39750	KZYP	MALVERN	AR	No
16518	KFFA-FM	HELENA	AR	No
16520	KFFA	HELENA	AR	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
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	01/21/2020
Certified Title	MEMBER
Authorized Party Name	MONTE SPEARMAN

Attachments

No Attachments.