

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0004282216
 File Number:
 0000115201
 Submit Date:
 06/01/2020
 Call Sign:
 WQUS
 Facility ID:
 14224
 City:

 LAPEER
 State:
 MI

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 Date:
 06/01/2020
 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.	Flint EEO Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Applicant	Address	Phone	Email	Applican Type
TOWNSQUARE MEDIA OF FLINT, INC. Doing Business As: TOWNSQUARE MEDIA OF FLINT, INC.	1 MANHATTANVILLE ROAD SUITE 202 PURCHASE, NY 10577 United States	+1 (203) 861-0900	Christopher. Kitchen@townsquaremedia. com	COR

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	Howard M. Liberman Counsel Wilkinson Barker Knauer, LLP	1800 M Street, NW Suite 800N Washington, DC 20036 United States	+1 (202) 383- 3373	hliberman@wbklaw. com	Legal Representative

Common
Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
20448	WWBN	TUSCOLA	МІ	No
14224	WQUS	LAPEER	МІ	No
78673	WRCL	FRANKENMUTH	МІ	No
20446	WCRZ	FLINT	МІ	No
14225	WLCO	LAPEER	МІ	No
20447	WFNT	FLINT	МІ	No

Section

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 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

Responsibility for Implementation Additional A broadcast station must assign a particular official overall responsibility for equal employment opportunity at the station. That **Program Report** Questions official's name and title are: Title Name Tonya Cooke **Business Manager** 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 06/01/2020 **Certified Title** Executive Vice President and General Counsel Authorized Party Name Christopher

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>eeo-2019-2020-20200521-125955246-</u> <u>doc.pdf</u>	Applicant	EEO Public File Report	2020 EEO Report	Done with Virus Scan and/or Conversion
Flint EE-2018-2019-20190530- 140734418-doc.pdf	Applicant	EEO Public File Report	2019 EEO Report	Done with Virus Scan and/or Conversion
Flint EEO Narrative Statement.pdf	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and/or Conversion
Flint - Schedule 396 Discrimination Complaint Exhibit (003).docx	Applicant	Discrimination Complaints	Flint EEO Discrimination Exhibit	Done with Virus Scan and/or Conversion

Kitchen