Broadcast Equal Employment Opportunity **Program Report**

Licensee Name, Type and Contact Information

FRN: 0007097108 File Number: 0000115452 Submit Date: 06/01/2020 Call Sign: WCPZ Facility ID: 19706 City: SANDUSKY State: OH Service: Full Power FM Purpose: EEO Report Status Date: 06/01/2020 Status: Received 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.	Schedule 396 - BAS Broadcasting Inc WCPZ, WMJK, WLEC	
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No	

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
BAS BROADCASTING, INC. Doing Business As: BAS BROADCASTING, INC.	1281 NORTH RIVER ROAD FREMONT, OH 43420 United States	+1 (419) 332- 8218	tomklein@basbroadcasting. com	COR

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	Melodie A. Virtue Foster Garvey PC	1000 Potomac St. NW Suite 200 Washington, DC 20007 United States	+1 (202) 965-7880	melodie.virtue@foster.com	Legal Representative

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	19705	WLEC	SANDUSKY	ОН	No
	19706	WCPZ	SANDUSKY	ОН	No
	58344	WMJK	CLYDE	ОН	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?	No	

Responsibility for Implementation Additional **Program Report** A broadcast station must assign a particular official overall responsibility for equal employment opportunity at the station. That Questions official's name and title are: Name Title Adam Klein Chief Operating Officer 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** President /CEO-Owner Authorized Party Name Tom Klein Uploaded Attachment Attachments **File Name Description Upload Status** By Туре BAS Broadcasting 2018-2019 Sandusky Annual EEO Applicant **EEO** Public Done with Virus

File Report

EEO Public

File Report

Narrative

Statement

Applicant

Applicant

Scan and/or Conversion

Done with Virus

Done with Virus

Scan and/or Conversion

Scan and/or Conversion

Report - WCPZ, WMJK, and WLEC.pdf

Report - WCPZ, WMJK, and WLEC.pdf

BAS Broadcasting EEO Narrative.pdf

BAS Broadcasting 2019-2020 Sandusky Annual EEO