



(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0007329840** | File Number: **0000130901** | Submit Date: **01/11/2021** | Call Sign: **KLVV** | Facility ID: **65922** | City: **PONCA CITY** | State: **OK**

Service: **Full Power FM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **01/11/2021** | 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.	
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
THE LOVE STATION, INC.	P O BOX 14 PONCA CITY, OK 74602 United States	+1 (800) 324-8488	TONY@KLVV.COM	NFP

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
THE LOVE STATION, INC. THE LOVE STATION, INC.	PO Box 14 Ponca City, OK 74602 United States	+1 (800) 324-8488	office@klvv.com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
65922	KLVV	PONCA CITY	OK	No
81146	KJTH	PONCA CITY	OK	No
191543	KTHM	WAYNOKA	OK	No
177198	KTHF	HAMMON	OK	No
83880	KZTH	PIEDMONT	OK	No
85076	KXTH	SEMINOLE	OK	No
177048	KTHL	ALTUS	OK	No
9942	KIXO	SULPHUR	OK	No
177142	KGVV	GOLTRY	OK	No

Program Report Questions

Section	Question	Response
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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**

Responsibility for Implementation

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
Tony Weir	CEO

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	01/11 /2021
Certified Title	CEO
Authorized Party Name	Tony Weir

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
2019-2020 EEO Public File.pdf	Applicant	EEO Public File Report	2019-2020 EEO Public File	Done with Virus Scan and/or Conversion
2019 2020 Outreach .pdf	Applicant	Narrative Statement		Done with Virus Scan and/or Conversion
2020-2021 EEO Public File.pdf	Applicant	EEO Public File Report	2020- 2021 EEO Public File	Done with Virus Scan and/or Conversion