

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: 0001683226	File Number: 0000140223	Submit Date: 03/18/2021	Call Sign: KDRY	Facility ID: 47666	City:
ALAMO HEIGHTS	State: TX				
Service: Full Power AM	Purpose: EEO Report	Status: Received	Status Date: 03/18/2021	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.	Form 396 - March 2021
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
KDRY RADIO, INC. Doing Business As: KDRY RADIO, INC.	KDRY RADIO, INC. 16414 SAN PEDRO AVENUE SUITE 575 SAN ANTONIO, TX 78232 United States	+1 (210) 545-1100	diana@kdry.com	COR

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
DIANA MORRIS PRESIDENT KDRY RADIO, INC.	DIANA MORRIS 16414 SAN PEDRO AVENUE SUITE 575 SAN ANTONIO, TX 78232 United States	+1 (210) 545-1100	diana@kdry.com	OFFICER

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
47666	KDRY	ALAMO HEIGHTS	TX	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	03/18 /2021
Certified Title	President
Authorized Party Name	Diana L Morris

Attachments

No Attachments.