

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0004677514** | File Number: **0000148422** | Submit Date: **06/01/2021** | Call Sign: **KCGL** | Facility ID: **43918** | City: **POWELL** | State: **WY**
Service: **Full Power FM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **06/01/2021** | 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.	Legend SEU 1 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
LEGEND COMMUNICATIONS OF WYOMING, LLC Doing Business As: LEGEND COMMUNICATIONS OF WYOMING, LLC	199 Carter View Drive Cody, WY 82414 United States	+1 (410) 799-1740	susan@patcomm.com	LLC

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Dawn Sciarrino Managing Member Sciarrino & Shubert, PLLC	330 Franklin Road Suite 135A-133 Brentwood, TN 37027 United States	+1 (202) 256-9551	dawn@sciarrinolaw.com	Legal Representative
David Smith Dave's Electronics	PO Box 1328 Pinedale, WY 82941 United States	+1 (307) 231-6032	dave@davstechshop.com	Technical Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
74351	KODI	CODY	WY	No
74354	KTAG	CODY	WY	No
5245	KZMQ	GREYBULL	WY	No
43918	KCGL	POWELL	WY	No
190415	KCWB	BYRON	WY	No
35896	KKLX	WORLAND	WY	No
35897	KWOR	WORLAND	WY	No
5248	KZMQ-FM	GREYBULL	WY	No

165979	KVGL	MANDERSON	WY	No
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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

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
Rita Conners	Vice President of Business Affairs

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	06/01 /2021
Certified Title	Co- Managing Member
Authorized Party Name	Susan Patrick

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
EEO Narrative Statement .pdf	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and/or Conversion
Legend SEU1 2019-2020 EEO.pdf	Applicant	EEO Public File Report	2019-2020 EEO Report	Done with Virus Scan and/or Conversion
SEU1 EEO Report 2020 2021.pdf	Applicant	EEO Public File Report	2020-2021 EEO	Done with Virus Scan and/or Conversion