

Broadcast Equal Employment Opportunity Program Report

 FRN:
 0001653641
 File Number:
 0000142548
 Submit Date:
 04/01/2021
 Call Sign:
 KCLL
 Facility ID:
 17778
 City:

 SAN ANGELO
 State:
 TX

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status Date:
 04/01/2021
 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.	EEO Program Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Informatio

Licensee Name, Type and Contact Information

nformation

Program Report

Questions

Applicant	Address	Phone	Email	Applicant Type
FOSTER COMMUNICATIONS COMPANY, INC.	P.O. BOX 2191 SAN ANGELO, TX 76902 United States	+1 (325) 949-2112	rickmantooth@fostercommunications. us	COR

Contact Representatives	Contact Name	Address		Phone	Em	ail	Contact Type
	F. Scott Pippin LERMAN SENTER PLLC	2001 L Street NW 400 Washington, DC United States		+1 (202) 429- 8970	spi cor	ppin@lermansenter. n	Legal Representative
Common Stations	Facility Identifier	Call Sign KKSA	City SAN AN	GELO	State TX	Time Brokerage Agr No	eement
	22157	KIXY-FM	SAN AN	GELO	ТΧ	No	
	22159	KWFR	SAN AN	GELO	ТΧ	No	
	17778	KCLL	SAN AN	GELO	ТΧ	No	

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					
	Rick Mantooth	Vice President/General Manager				
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		04/01 /2021			
	Certified Title		President			
	Authorized Party Name		Fred M. Key			
Attachments	File Name	Uploaded By Attachment Type Description Upload Status				

File Name	By	Attachment Type	Description	Upload Status
2019-20 Foster EEO Public File Report.pdf	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
2020-21 Foster EEO Public File Report.pdf	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
Narrative Statement.pdf	Applicant	Narrative Statement		Done with Virus Scan and/or Conversion