

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

FRN: 0008624462 F	ile Number: 0000152478	Submit Date: 07/13/2	2021 Call Sign: KCPC	Facility ID: 122735 City:
CAMINO State: CA				
Service: Full Power FM	Purpose: EEO Report	Status: Received	Status Date: 07/13/2021	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.	KCPC EEO Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
NEVADA CITY COMMUNITY BROADCAST GROUP Doing Business As: NEVADA CITY COMMUNITY BROADCAST GROUP	120 Bridge Street NEVADA CITY, CA 95959 United States	+1 (530) 265- 9073	GM@KVMR. ORG	NFP

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
MICHAEL COUZENS	michael couzens	+1 (510) 658-	CUZ@WELL.COM	Legal Representative
Attorney at Law	PO Box 94609	7654		
Michael Couzens Law Office	oakland, CA 94609 United States			
DONALD E MUSSELL E Mussell ,	P.O. BOX 983	+1 (831) 588-	DMSML@WELL.	Technical
Jr.	KILAUEA, HI	9463	COM	Representative
CONSULTING ENGINEER	96754			
Donald E. Mussell Jr. CBT	United States			

Common	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
Stations	122735	KCPC	CAMINO	CA	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	07/13 /2021
	Certified Title	Board Chair
	Authorized Party Name	Brian Terhorst

Attachments

No Attachments.