

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0004330817** File Number: **0000162510** Submit Date: **10/01/2021** Call Sign: **KLHI-FM** Facility ID: **166083**

City: KAHULUI State: HI

Service: Full Power FM Purpose: EEO Report Status: Received Status Date: 10/01/2021 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.	KLHI-FM KPOA KJKS KMVI KNUI KJMD EEO
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
PACIFIC RADIO GROUP, INC. Doing Business As: PACIFIC RADIO GROUP, INC.	311 ANO ST. KAHULUI, HI 96732 United States	+1 (808) 877- 5566	publicinfo@pmghawaii. com	COR

Contact Representatives

t Rd. N +1 (703) 243 VA 8690	DJA@COMMLAW. TV	Legal Representative
	` ,	VA 8690 TV

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
166083	KLHI-FM	KAHULUI	HI	No
9674	KJKS	KAHULUI	НІ	No
49956	KNUI	WAILUKU	HI	No
9678	KMVI	KAHULUI	НІ	No
49958	KJMD	PUKALANI	НІ	No
35490	KPOA	LAHAINA	НІ	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?	No
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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
Sherri Grimes	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	10/01 /2021
Certified Title	President
Authorized Party Name	Richard Charles Bergson

Attachments

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