

Broadcast Equal Employment Opportunity **Program Report**

FRN: 0029351228 File Number: 0000077949 Facility ID: 34353 Submit Date: 07/11/2019 Call Sign: WYSR City: HIGH POINT State: NC Service: Full Power AM Purpose: EEO Report Status: Received Status Date: 07/11/2019 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.	2019 Schedule 396 EEO Program Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee

Licensee Name,	Type and	Contact Information	

Information

Program Rep Questions

Applicant	Address	Phone	Email	Applicant Type
LATINO BROADCASTING, LLC	3067 WAUGHTOWN STREET WINSTON-SALEM, NC 27107 United States	+1 (336) 399- 8478	joseisasi@quepasamedia. com	LLC

Contact Name Address Phone Email **Contact Type** Contact Representatives wysr@quepasamedia. Ben Greenberg 3067 Waughtown St +1 (336) 362-Technical TECHNICAL CONSULTANT Winston-Salem, NC 7164 com Representative Latino Broadcasting LLC 27107 **United States** JOHN C. TRENT , ESQUIRE . 200 SOUTH CHURCH +1 (540) 459-FCCMAN3@SHENTEL. Legal PUTBRESE HUNSAKER & STREET 7646 NET Representative TRENT, P.C. WOODSTOCK, VA 22664 **United States**

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	34353	WYSR	HIGH POINT	NC	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?	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	07/11/2019		
	Certified Title	Director, Information Systems		
	Authorized Party Name	Ben Greenberg		

Attachments

No Attachments.