Approved by OMB (Office of Management and Budget) | OMB Control Number 3060-0113

Federal Communications Commission

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Mid-Term Report

FRN: **0001547462** | File Number: **0000060081** | Submit Date: **10/01/2018** | Call Sign: **KOBI** | Facility ID: **8260** | City: **MEDFORD** | State: **OR**

Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **10/01/2018** | Filing Status: **Active**

General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
CALIFORNIA OREGON BROADCASTING, INC.	PATRICIA C. SMULLIN PO Box 1489 MEDFORD, OR 97501 United States	+1 (541) 779-5555	cobiadmin@kobi5.com	COR

Contact Representatives

Information not provided.

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
8309	K32DY-D	MEDFORD`	OR	No
8296	K25OK-D	YONCALLA	OR	No
8252	K47DV-D	Yreka	CA	No
8261	K50FW-D	Gold Hill	OR	No
8307	K36BX-D	COOS BAY	OR	No
8284	KOTI	KLAMATH FALLS	OR	No
8258	K07PZ-D	CAVE JUNCTION	OR	No
8260	KOBI	MEDFORD	OR	No

Mid-Term Report Questions

Section	Question	Response
Mid-Term Report	Does your station employment unit employ fewer than five full-time employees?	No

Additional Mid-Term 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

Chelsea Valdez	Director of Human Resources

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 /2018
Certified Title	President
Authorized Party Name	Patricia C. Smullin

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
Medford Klamath Falls 2017 Public File Report.pdf	Applicant	All Purpose	2017 Public File Report	Done with Virus Scan and/or Conversion
Medford Klamath Falls 2018 Public File Report.pdf	Applicant	All Purpose	2018 Public File Report	Done with Virus Scan and/or Conversion