

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0004345773** File Number: **0000067671**

Submit Date: 02/01/2019 | Call Sign: WTVU-CD | Facility ID: 617

SYRACUSE State: NY

Service: Digital Class A Purpose: EEO Report Status: Received Status Date: 02/01/2019 Filing Status: Active

General Information

Section	Question	Response
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
RENARD COMMUNICATIONS CORP. Doing Business As: RENARD COMMUNICATIONS CORP.	Craig Fox 401 W. KIRKPATRICK ST. SYRACUSE, NY 13204 United States	+1 (315) 468- 0908	CRAIGF199@AOL. COM	COR

Contact Representatives

Information not provided.

	Tagility Identifier	Call Sign	City	State	Time Brokerage Agreement
Statio	ons 617	WTVU-CD	SYRACUSE	NY	No
	34341	WTKO-CD	ONEIDA	NY	No
	14315	WONO-CD	SYRACUSE, ETC.	NY	No
	629	WHSU-CD	SYRACUSE	NY	No
	14312	WIXT-CD	DEWITT	NY	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

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	02/01
Certified Title	/2019 President
Authorized Party Name	Craig Fox

The undersigned certifies that he or she is (a) the party filing the report, or an officer, director, member, partner,

Attachments

No Attachments.