

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0004381265** File Number: **0000120957** Submit Date: **08/31/2020** Call Sign: **WLKG** Facility ID: **67290** City:

LAKE GENEVA State: WI

Service: Full Power FM Purpose: EEO Report Status: Received Status Date: 08/31/2020 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.	EEO Report for license renewal
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
CTJ COMMUNICATIONS, LTD. Doing Business As: CTJ COMMUNICATIONS, LTD.	Nancy Douglass 500 INTERCHANGE NORTH Suite 100 LAKE GENEVA, WI 53147 United States	+1 (262) 249- 9600	nancyd@wlkg. com	LLC

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Nancy Douglass General Manager CTJ COMMUNICATIONS, LTD.	500 INTERCHANGE NORTH BOX 9610 LAKE GENEVA, WI 53147 United States	+1 (262) 249- 9600	nancyd@wlkg. com	General Manager

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
67290	WLKG	LAKE GENEVA	WI	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

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
Nancy Douglass	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	08/31 /2020
Certified Title	General Manager
Authorized Party Name	Nancy Douglass

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
Appendix A - August 2018 - July 2019.doc	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
Appendix A - August 2019 - July 2020.doc	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
Appendix B - August 2018 - July 2019.doc	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
Appendix B - August 2019 - July 2020.doc	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
Appendix C - August 2018 - July 2019.doc	Applicant	Narrative Statement		Done with Virus Scan and/or Conversion
Appendix C - August 2019 - July 2020.doc	Applicant	Narrative Statement		Done with Virus Scan and/or Conversion