

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0019549062
 File Number:
 0000121827
 Submit Date:
 09/18/2020
 Call Sign:
 KUOO
 Facility ID:
 8502
 City:

 SPIRIT LAKE
 State:
 IA

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status Date:
 09/18/2020
 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.	KUOO/KUQQ/KUYY/KKOJ /KUXX EEO Rpt
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
COMMUNITY FIRST BROADCASTING, LLC Doing Business As: COMMUNITY FIRST BROADCASTING, LLC	Neil W. Lipetzky 5809 S REMINGTON PLACE SUITE 106 SIOUX FALLS, SD 57108 United States	+1 (605) 274-3373	NEIL@DAKOTABROADCASTING. COM	LLC

Contact	Contact Name	1	Address	S	Phone		Email	Contact Type
Representatives	Lawrence Bernstein Attorney Law Offices of Lawrence Bernstein		NW	oringland LN gton, DC States	+1 (202) 1800	296-	lawberns@verizon. net	Legal Representative
Common Stations	Facility Identifier	Call Sig	-	City		State	Time Brokerage Ag	reement
	35057	KUXX		JACKSON		MN	No	
	60002	KUQQ		MILFORD		IA	No	
	35056	KKOJ		JACKSON		MN	No	
	29724	KUYY		EMMETSBUR	G	IA	No	
	8502	KUOO)	SPIRIT LAKE		IA	No	

Program	Report
Questions	S

Section	

Discrimination Compla

	Question	Response
laints	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 Impl A broadcast station must as official's name and title are:	ementation sign a particular official overall responsibility for equal employment op	oportunity at the station. That
	Name	Title	
	Neil W. Lipetzky	Manager	
Certification	trustee, authorized employ behalf of the party filing the R. Section 1.23(a), who is	hat he or she is (a) the party filing the report, or an officer, director, m ee, or other individual or duly elected or appointed official who is auth e report; or (b) an attorney qualified to practice before the Commission authorized to represent the party filing the report, and who further cer t; that to the best of his or her knowledge, information, and belief there	norized to sign on n under 47 C.F. tifies that he or
	to support it; and that it is r Certified Date	-	09/18
	Certified Title		Member /Manager
	Authorized Party Name		Neil W. Lipetzky

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>COM 1ST EEO - 2020</u> <u>Okoboji.pdf</u>	Applicant	EEO Public File Report	Okoboji 2020 EEO Rpt	Done with Virus Scan and/or Conversion
<u>COM 1st - EEO Narrative.</u> pdf	Applicant	Narrative Statement	EEO Narrative	Done with Virus Scan and/or Conversion
<u>COM 1ST EEO - Okoboji</u> 2019.pdf	Applicant	EEO Public File Report	Okoboji 2019 EEO Rpt	Done with Virus Scan and/or Conversion