

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0010210235** | File Number: **0000133804** | Submit Date: **01/29/2021** | Call Sign: **KXCA** | Facility ID: **61593** | City: **LAWTON** | State: **OK**
 Service: **Full Power AM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **01/29/2021** | 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
MOLLMAN MEDIA, INC. Doing Business As: MOLLMAN MEDIA, INC.	627 WEST CHICKASHA AVE. CHICKASHA, OK 73018 United States	+1 (405) 224-1560	MATTHEW@MOLLMANMEDIA.COM	COR

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
David D Oxenford Wilkinson Barker Knauer, LLP	1800 M Street, NW Suite 800N Washington, DC 20036 United States	+1 (202) 783-4141	doxenford@wbklaw.com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
37687	KDDQ	COMANCHE	OK	No
17730	KPNS	DUNCAN	OK	No
61593	KXCA	LAWTON	OK	No
70015	KACO	APACHE	OK	No
17729	KKEN	DUNCAN	OK	No
35031	KJMZ	CACHE	OK	No
6750	KWCO-FM	CHICKASHA	OK	No
50213	KKRX	LAWTON	OK	No

Program Report Questions

Section	Question	Response
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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
Matthew Mollman	President

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	01/29 /2021
Certified Title	President
Authorized Party Name	Matthew Mollman

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
Mollman 2019 EEO Public File Report.pdf	Applicant	EEO Public File Report	Mollman 2019 EEO Public File Report	Done with Virus Scan and/or Conversion
Mollman 2020 EEO Public File Report.pdf	Applicant	EEO Public File Report	Mollman 2020 EEO Public File Report	Done with Virus Scan and/or Conversion
Mollman Media EEO Narrative Statement for Renewals.docx	Applicant	Narrative Statement	Mollman EEO Narrative Statement	Done with Virus Scan and/or Conversion