

## Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0030517593
 File Number:
 0000155235
 Submit Date:
 08/02/2021
 Call Sign:
 KRSH
 Facility ID:
 16257
 City:

 HEALDSBURG
 State:
 CA

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 08/02/2021
 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.	B.C. Radio LLC EEO Program Report	
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No	

## Licensee Information

Applicant	Address	Phone	Email	Applicant Type
B.C. Radio LLC	Ravi Potharlanka	+1 (707) 588-	ravi@winecountryradio.	LLC
Doing Business As: B.C. Radio	3565 Standish	0707	net	
LLC	Avenue			
	Santa Rosa, CA			
	95407			
	United States			

Contact Representatives	Contact Name	Address		Phone	I	Email	Contact Type
	Jonathan Cohen Wilkinson Barker Knauer LLP	1800 M Str Suite 800N Washingtor 20036 United Stat	l n, DC	+1 (202) 383 3416		joncohen@wbkl com	aw. Legal Representative
Common Stations	Facility Identifier	Call Sign	City		State	Time Broke	rage Agreement
	43711	KSXY	FOREST	/ILLE	CA	No	
	79003	KNOB	HEALDSE	BURG	CA	Yes	
	72925	KXTS	GEYSER	VILLE	CA	No	
	16257	KRSH	HEALDSE	BURG	CA	No	
Program Report Questions	Section	Question					Response
	Discrimination Complaint		-	esolved complai e any body havi		-	No

of the station(s)?

jurisdiction under federal, state, territorial or local law,

alleging unlawful discrimination in the employment practices

	Full-time Employees	full-time employee	s? Consider as	t employ fewer than five "full-time" employees all nore hours a week?	No			
Program Report	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							
	Andre de Channes Operations 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							
	Certified Title					Managing Member		
	Authorized Party Name					Ravi Potharlanka		
Attachments	File Name	Uploaded By	Attachment Type	Description	Upload Stat	tus		
	2019-2020 B.C. Radio EEO Reporting Period Exhibit.pdf	Applicant	EEO Public File Report	2019-2020 B.C. Radio EEC Reporting Exhibit		e with Virus Scan /or Conversion		
	2021 B.C. Radio EEO Public F Report.pdf	<u>ile</u> Applicant	EEO Public File Report	2021 B.C. Radio EEO Public File Report	Done with V and/or Conv			
-	B.C. Radio LLC EEO Narrative Statement.pdf	_ Applicant	Narrative Statement	B.C. Radio LLC EEO Narrative Statement	Done with \ and/or Conv			