

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0017400458
 File Number:
 0000181339
 Submit Date:
 01/26/2022
 Call Sign:
 WCIZ-FM
 Facility ID:
 153
 City:

 WATERTOWN
 State:
 NY

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status Date:
 01/26/2022
 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.	Watertown EEO Report	
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No	

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
STEPHENS MEDIA GROUP WATERTOWN, LLC	2448 E. 81ST	+1 (918)	gena.	LLC
Doing Business As: STEPHENS MEDIA GROUP	STREET	492-2660	mitchell@smgnational.	
WATERTOWN, LLC	SUITE 5500		com	
	TULSA, OK			
	74137			
	United States			

Contact Representatives	Contact Name	Contact Name		Address			Email	Contact Type
	Joseph C. Chautin III Hardy, Carey, Chautin & Balkin, LLP		PO Box 70471 Mandeville, LA 70471 United States				jchautin@hardycarey. com	Legal Representative
Common Stations	Facility Identifier 71094		Call Sign WFRY-FM		City WATERTOWN		Time Brokerage Agreement	
	71093	WNE	R	WATERT	OWN	NY	No	
	154	WTN	Y	WATERTOWN		NY	No	
	153	WCIZ	-FM	WATERTOWN		NY	No	
	Oraclan	•					Deene	

Program Report	Section	Question	Response
Questions	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	full-time employees	employment unit empl ? Consider as "full-tir working 30 or more h	me" employees all	No			
Additional 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							
	Gena Mitchell		Executive Assista	nt				
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							
	Authorized Party Name					David P Stephens		
Attachments	File Name	Uploaded By	Attachment Type	Description	Upload Status			
	EEO PF Report 2021-22.pdf	Applicant	EEO Public File Report	EEO 21-22	Done with Virus Scar Conversion	with Virus Scan and/or ersion		
	EEO Program Report (narrative statement).pdf	<u>a</u> Applicant	Narrative Statement	Narrative Statement	Done with Virus Scar Conversion	irus Scan and/or		
	Watertown EEO 20-21.pdf	Applicant	EEO Public File Report	EEO 20-21	Done with Virus Scar Conversion	n and/or		