

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0003583515** | File Number: **0000183063** | Submit Date: **01/31/2022** | Call Sign: **WKOL** | Facility ID: **68692** | City:
PLATTSBURGH | State: **NY**
 Service: **Full Power FM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **01/31/2022** | 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.	2022 New York EEO Program Report
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
HALL COMMUNICATIONS, INC. Doing Business As: Hall Communications, Inc.	404 West Lime Street Lakeland, FL 33815 United States	+1 (863) 682-8184	ddubonnet@hallradio.net	COR

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Susan April Marshall , Esq . Special Counsel Shainis & Peltzman, Chartered	1850 M Street NW Suite 240 Washington, DC 20036 United States	+1 (202) 293-0011	susan@s-plaw.com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
68692	WKOL	PLATTSBURGH	NY	No
52807	WBTZ	PLATTSBURGH	NY	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

Responsibility for Implementation

Program Report Questions

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
Andrea Lammly	Business 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	01/31/2022
Certified Title	President
Authorized Party Name	Arthur J. Rowbotham, Esq .

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
2021 Annual EEO Report for NY Stations.pdf	Applicant	EEO Public File Report	2020-21 Annual Report	Done with Virus Scan and/or Conversion
2022 Annual EEO Report for NY Stations.pdf	Applicant	EEO Public File Report	2021-22 Annual Report	Done with Virus Scan and/or Conversion
WKOL(FM) AND WBTZ(FM) Narrative Statement - EEO Program Report (Form 396).pdf	Applicant	Narrative Statement	Statement	Done with Virus Scan and/or Conversion