

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0001856467** File Number: **0000091782** Submit Date: **11/27/2019** Call Sign: **WCON** Facility ID: **25813** City:

CORNELIA State: GA

Service: Full Power AM Purpose: EEO Report Status: Received Status Date: 11/27/2019 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.	WCON (AM) and WCON- FM Broadcast Equal Employment Opportunity 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
HABERSHAM BROADCASTING COMPANY	Clayton Foster P. O. BOX 100 540 Main Street CORNELIA, GA 30531 United States	+1 (706) 778- 2241	cfoster@habershambroadcasting.com	COR

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
A. Wray Fitch , III . Attorney GAMMON & GRANGE, P. C.	8280 Greensboro Drive Suite 140 McLean, VA 22102 United States	+1 (703) 761- 5013	AWF@GG-LAW.COM	Legal Representative
Clifton G. Moor Technical Consultant Bromo Communications, Inc.	3600 Dallas Highway Suite 230 - PMB 164 Marietta, GA 30064 United States	+1 (404) 636- 2257	GIL@BROMOCOM. COM	Technical Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
25813	WCON	CORNELIA	GA	No
25814	WCON-FM	CORNELIA	GA	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 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
Clayton Foster	Corporate Secretary

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	11/27 /2019
Certified Title	Corporate Secretary
Authorized Party Name	Clayton Foster

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
WCON-FM and AM 2017-2018 EEO Public File Report.pdf	Applicant	EEO Public File Report	WCON-FM and AM 2017-2018 EEO Public File Report	Done with Virus Scan and/or Conversion
WCON-FM and (AM) EEO PUBLIC FILE 2018-2019.docx	Applicant	EEO Public File Report	WCON-FM and (AM) EEO PUBLIC FILE 2018-2019	Done with Virus Scan and/or Conversion
WCON-FM and (AM) Narrative Statement.docx	Applicant	Narrative Statement	WCON-FM and (AM) Narrative Statement	Done with Virus Scan and/or Conversion