

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0016426603
 File Number:
 0000104931
 Submit Date:
 02/03/2020
 Call Sign:
 KFIN
 Facility ID:
 17690
 City:

 JONESBORO
 State:
 AR

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status Date:
 02/03/2020
 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.	East Arkansas Broadcasters of Jonesboro, LLC Form 396 EEO Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Applicant	Address	Phone	Email	Applican Type
EAST ARKANSAS BROADCASTERS OF JONESBORO, LLC	P.O. BOX 789	+1 (870) 238-8141	bobbycaldwell@cablelynx. com	LLC
Doing Business As: EAST ARKANSAS	HIGHWAY	230-0141	com	
BROADCASTERS OF JONESBORO, LLC	64 WEST WYNNE, AR			
	72396 United States			

Contact Representatives

	Contact Name	Address	Phone	Email	Contact Type
S	John F. Garziglia Partner Womble Bond Dickinson (US) LLP	John F. Garziglia 1200 19th Street, N.W., Suite 500 Washington, DC 20036 United States	+1 (202) 857- 4455	John.Garziglia@wbd- us.com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
17690	KFIN	JONESBORO	AR	No
17692	KBTM	JONESBORO	AR	No
142879	K276FJ	WALNUT RIDGE	AR	No
31609	KNEA	JONESBORO	AR	No
51923	KWHF	HARRISBURG	AR	No
151068	K267AS	PIGGOTT	AR	No
70465	KIYS	WALNUT RIDGE	AR	No

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

Responsibility for Implementation Additional **Program Report** A broadcast station must assign a particular official overall responsibility for equal employment opportunity at the station. That Questions official's name and title are: Title Name Barbara Nelson **Business Manager** Question Response Certification 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 02/03 /2020 **Certified Title** Managing Member Authorized Party Name Bobby D. Caldwell

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
EEO Public File Report 1 21 19.pdf	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
EEO Public File Report 1 23 20.pdf	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
Narrative Statement.pdf	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and/or Conversion