

## Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0005014253
 File Number:
 0000120291
 Submit Date:
 08/10/2020
 Call Sign:
 KLEX
 Facility ID:
 6507
 City:

 LEXINGTON
 State:
 MO

 Service:
 Full Power AM
 Purpose:
 EEO Report
 Status:
 Received
 Status Date:
 08/10/2020
 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.	KLEX EEO Program Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

## Licensee Information

Applicant	Address	Phone	Email	Applicant Type
BOTT COMMUNICATIONS, INC. Doing Business As: BOTT COMMUNICATIONS, INC.	10550 BARKLEY, SUITE 100 OVERLAND PARK, KS 66212 United States	+1 (913) 642-7770	FCCContact@bottradionetwork. com	COR

Contact Representatives	Contact Name	Address	<b>s</b>	Phone	Email			Contact Type
	JEREMY D. RUCK , PE . CONSULTING ENGINEER JEREMY RUCK & ASSOCIATES, INC.	PO Box CANTO 61520 United S	N, IL	+1 (309) 647- 1200	JERE COM	:MY@JEREMYF	RUCK.	Technical Representative
	Kathleen Victory FCC Counsel Fletcher Heald & Hildreth, Pl	1300 N. Street LC Suite 11 Arlingto 22209 United S	00 n, VA	+1 (703) 812- 0473	victor	y@fhhlaw.com		Legal Representative
Common Stations	Facility Identifier	Call Sign	City		State	Time Brokera	age Agr	eement
	6507	KLEX	LEXING	TON	МО	No		
Program Report Questions	Section	Question					Respo	nse
	Discrimination Complaints	this license jurisdiction	term before under feder	esolved comple any body hav al, state, territo mination in the	ving compe orial or loc	etent al law,	No	

of the station(s)?

	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?	Yes			
Certification	Question	Question				
	trustee, authorized employee behalf of the party filing the r R. Section 1.23(a), who is au she has read the document;	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 Date				
	Certified Title		Vice President			
	Authorized Party Name		Richard P. Bott , II .			

Attachments

No Attachments.