

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

FRN: 0003737459File Number: 0000131819Submit Date: 01/20/2021Call Sign: KRIG-FMFacility ID: 35535City: NOWATAState: OKService: Full Power FMPurpose: EEO ReportStatus: ReceivedStatus Date: 01/20/2021Filing Status: Active

General	Section	Question	Response
Information	tion 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.	2021 KRIG-FM, KWON & KYFM EEO
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
KCD ENTERPRISES, INC. Doing Business As: KCD ENTERPRISES, INC.	Kevin M. Potter, President PO Box 1100 BARTLESVILLE, OK 74005 United States	+1 (918) 336- 1001	Kevin@bartlesvilleradio. com	COR

Contact	
Representatives	

Contact Name	Address	Phone	Email	Contact Type
John C. Trent , Esq .	John C. Trent, Esq.	+1 (540) 459-	fccman3@shentel.	Legal
Counsel	200 South Church	7646	net	Representative
Putbrese Hunsaker & Trent, P.	Street			
С.	Woodstock, VA 22664			
	United States			

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	35535	KRIG-FM	NOWATA	OK	No
	36005	KYFM	BARTLESVILLE	ОК	No
	36004	KWON	BARTLESVILLE	OK	No

Program F	Report
Questions	5

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		Title	tle	
	Kevin M Potter President		President		
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			01/20 /2021	
	Certified Title			President	
	Authorized Party Name			Kevin M Potter	

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
2019 Annual EEO Report.KCD. Potter.pdf	Applicant	EEO Public File Report	2019-2020 EEO	Done with Virus Scan and/or Conversion
EEO NARRATIVE.KCD.Potter.	Applicant	Narrative Statement	EEO Narrative	Done with Virus Scan and/or Conversion