

(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0022936173** File Number: **0000138189** Submit Date: **03/09/2021** Call Sign: **KABW** Facility ID: **39159** City

BAIRD State: TX

Service: Full Power FM Purpose: EEO Report Status: Received Status Date: 03/09/2021 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.	KABW EEO 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
COMMUNITY BROADCAST PARTNERS LLC Doing Business As: COMMUNITY BROADCAST PARTNERS LLC	David Klement 4642 SOUTH TREADAWAY BLVD ABILENE, TX 79602 United States	+1 (325) 437-9596	DAVID@ABILENERADIO. COM	LLC

#### Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
MARISSA REPP REPP LAW FIRM	MARISSA G REPP 1629 K STREET NW SUITE 300 WASHINGTON, DC 20006 United States	+1 (202) 656- 1619	MARISSA@REPPLAWFIRM. COM	Legal Representative
JIM TURVAVILLE CONSULTING ENGINEER TURBO TECH SERVICES	JIM TURVAVILLE PO Box 144 MOBEETIE, TX 79061 United States	+1 (719) 459- 1859	JIMTURBO61@YAHOO. COM	Technical Representative

### **Common Stations**

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
39159	KABW	BAIRD	TX	No
84288	KORQ	WINTERS	TX	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	Yes
	those permanently working 30 or more hours a week?	

### 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	03/09/2021
Certified Title	PRESIDENT
Authorized Party Name	DAVID WARREN KLEMENT

#### **Attachments**

No Attachments.