

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0005016100
 File Number:
 0000142828
 Submit Date:
 04/01/2021
 Call Sign:
 KBWD
 Facility ID:
 7321
 City:

 BROWNWOOD
 State:
 TX

 Service:
 Full Power AM
 Purpose:
 EEO Report
 Status:
 Received
 Status Date:
 04/01/2021
 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.	2021 KBWD EEO Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
BROWN COUNTY BROADCASTING CO.	Bonnie Dillard	+1 (325) 646-	bonniedillard16@gmail.	COR
Doing Business As: BROWN COUNTY BROADCASTING CO.	300 CARNEGIE BLVD	3505	com	
	BROWNWOOD, TX 76801			
	United States			

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	JESSICA A ROGERS Attorney LUVAAS COBB	777 HIGH STREET SUITE 300 EUGENE, OR 97401 United States	+1 (541) 484- 9292	JROGERS@LUVAASCOBB. COM	Legal Representative

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	7321	KBWD	BROWNWOOD	ТХ	No
	7320	KOXE	BROWNWOOD	тх	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	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:				
Program Report Questions					
	Name Title				
	Bonnie Dillard	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				

to support it; and that it is not interposed for delay

Certified Date

Certified Title

Authorized Party Name

she has read the document; that to the best of his or her knowledge, information, and belief there is good ground

04/01 /2021

Secretary

Bonnie Dillard

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
2019 KBWD EEO Report.pdf	Applicant	EEO Public File Report	2019 EEO Report for KBWD	Done with Virus Scan and/or Conversion
Brown County EEO report [filed 3- 25-2013].pdf	Applicant	EEO Public File Report	2013 EEO Report	Done with Virus Scan and/or Conversion
KBWD Narrative.pdf	Applicant	Narrative Statement	KBWD Narrative	Done with Virus Scan and/or Conversion