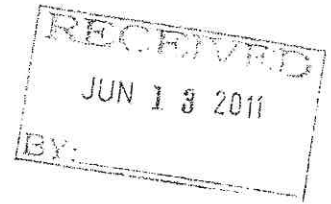


United States Government
Federal Communications Commission
Consumer & Governmental Affairs Bureau
Disability Rights Office
445 12th Street, SW
Washington, D.C. 20554



OFFICIAL
NOTICE OF INFORMAL COMPLAINT

June 13, 2011
In reply refer to case number: 11-C00297663 (SK)
(Mitchell) (KTEN-TV)

THE COMPANY IDENTIFIED IN THE ATTACHED COMPLAINT IS REQUIRED TO RESPOND TO THIS NOTICE OF INFORMAL COMPLAINT WITHIN 30 DAYS OF THE DATE OF THIS NOTICE. Failure of any person to answer any lawful Commission inquiry is considered a misdemeanor punishable by a fine under Section 409(m) of the Communications Act (Act), 47 U.S.C. § 409(m). Further, failure to comply with any order of the Commission can result in prosecution under Section 401(b) of the Act, 47 U.S.C. § 401(b). Section 501 of the Act, 47 U.S.C. § 501, and Section 503(b)(1)(B) of the Act, 47 U.S.C. § 503(b)(1)(B), provide for forfeiture penalties against any person who willfully fails to follow the directives of the Act or of a Commission order. The Commission can impose forfeiture penalties of up to \$1.2 million for certain types of violations.

The attached complaint was filed with the Commission pursuant to Section 713 of the Act, 47 U.S.C. § 613, and Section 79.2 of the Commission's Rules, 47 C.F.R. § 79.2. A letter acknowledging your company's receipt of this Notice and of the enclosed complaint should be sent to each consumer Complainant as soon as your company receives this Notice. Pursuant to Sections 713 and 4(i) of the Act, 47 U.S.C. §§ 613, 154(i), and Section 79.2(c) of the Commission's Rules, 47 C.F.R. § 79.2(c), we are forwarding a copy of the complaint so that your company may satisfy or answer the complaint based on a thorough review of all relevant records and other information. Your company should respond specifically to all material allegations raised in each complaint and summarize the actions taken by your company to satisfy the complaint.

Your response should include: (1) the Complainant's name, and (2) the Case number. Please also include some form of recording (CD, DVD, VHS) of the time(s) and date(s) of the complained about event(s). Written responses must be filed with the Commission at 445 12th St., SW, Washington, D.C. 20554. A separate response should be filed for each individual complaint. Each response should include: (1) the Complainant's name, and (2) the Case number. Companies are directed to send copies of their responses to the complainant at the same time their responses are forwarded to the Commission.

Due to heightened security measures undertaken in Washington, D.C., and at this agency, you should also send an electronic copy of the response letter to Susan.Kimmel@fcc.gov AND to Sherita.Kennedy@fcc.gov. Companies are directed to send copies of their responses to consumers at the same time their responses are forwarded to the Commission. Each company required to respond to this Notice is directed to retain all records until final Commission disposition of the complaints. If you have any questions regarding this Notice, please call or email Sherita Kennedy at (202) 418-0287 or Sherita.Kennedy@fcc.gov, and leave a detailed message specifying the calling company name, the Case number, and the specific questions that you would like to have answered.

Sincerely,

A handwritten signature in cursive script that reads "Susan L. Kimmel".

Susan L. Kimmel, Deputy Chief
Disability Rights Office/CGB



FOR FCC INTERNAL USE ONLY
 Sherita.Kennedy [CAM] Logout

Admin 2000 [Switch to Admin1088]

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 - [SEARCH](#)
 - [NEW COMPLAINT](#)
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Form 2000C (Disability Access Complaint) : 11-C00297663-1

- User Form
- Admin Comments
- Serve Review
- Serve Process
- File Attachments
- Letters
- Show All
- Sub Complaints(0)
- Print Form
- Email Factsheet(s)

USER FORM

- [Consumer Party History](#)
- [Consumer History](#)
- [Form History](#)
- [Edit Form](#)

User Complaint Number: 11-C00297663 User Complaint Key: 11-C00297663-1
 Complaint Source: Web Added User: Consumer

Submission date: 04/15/2011

CONSUMER'S INFORMATION

First Name: James Last Name: Mitchell

Company Name:
 (Complete only if you are filing this complaint on behalf of a company or an organization.)

PO Box:
 Address1: 717 E. 14th st Address2:
 City: Ada State: OK Zip Code: 74820

Telephone Number(Residential or Business): (918) 894 -5594 Ext:

E-mail Address: thebulldog47@yahoo.com

Are you filing information on behalf of another party, such as client, parent, spouse or roommate? **No**
 If yes, complete items a through h.

Your relationship with the party:

- The party's first name:
- The party's last name:
- The party's daytime phone number: () - Ext:
- The party's street address or post office box number:
- City: State: Zip Code:
- E-mail Address:
- Fax Number: () -

IMPORTANT: Please indicate the preferred format or method of response to the complaint by the Commission and defendant:

- Letter Facsimile (fax) Telephone Voice
- TRS (designate form of TRS and appropriate contact information)
- TTY Internet E-mail ASCII Text Audio-Cassette Recording Braille

FORM 2000C:

1. Check the appropriate box for your type of complaint:
 - Telecommunications Relay Service (TRS) (i.e., TTY-based, IP Relay, CapTel, IP CapTel, Speech-to-Speech, Video Relay Service (VRS))
 - Accessibility of emergency information on television
 - Closed Captioning
 - Wireless telephone equipment or service (includes hearing aid compatibility and other accessibility issues)
 - Wire line telephone equipment or service (includes hearing aid compatibility and other accessibility issues)
2. Provide the name, address and telephone number (if known) of the company(s) involved in your complaint:

Name: K TEN

City: State: OK Zip Code:

Telephone number: () -
3. If your complaint is about accessibility of telecommunications services or equipment, provide the make and model number of the equipment or device that this complaint is about:
4. If your complaint is about closed captioning or emergency information on television, provide the date (mm/dd/yyyy) 04/14/2011 Time: 04:30 PM and any details of when the event or action you are complaining

about occurred: **Tornado warning was in the area. turned on TV and KTEN did not have captions provided. went on KTEN's facebook page to complain about it and they implied that they did not have to provide captions and that scroll of info on bottom of screen is good enough.**

5. If your complaint is about access to emergency information on television, provide the following information:
 - a. Television station call sign and network name (if applicable), or channel name (e.g., "WZUF, CBC," "WZUE-TV," "Sportingchannel West"): **KTEN**
 - b. Channel (e.g., "13"): **10**
 - c. Station or subscription TV provider system location:
City: County: State:
 - d. Date(s) and time(s) of emergency: **04/14/2011 and time 04:30 PM**
 - e. Detailed description of the emergency (i.e., flood, hurricane, tornado, etc., as well as the areas in which the emergency occurred): **Tornado warning was in the area. turned on TV and KTEN did not have captions provided. went on KTEN's facebook page to complain about it and they implied that they did not have to provide captions and that scroll of info on bottom of screen is good enough.**
6. If your complaint is about closed captioning, provide the following:
 - a. Television station call sign and network name (if applicable), or channel name (e.g., "WZUF, CBC," "WZUE-TV," "Sportingchannel West"):
 - b. Channel (e.g., "13"):
 - c. Station or subscription TV provider system location:
City: County: State:
 - d. If you pay to receive television programming, type of subscription service (e.g., cable, satellite):
 - e. If you pay to receive television programming, name of company to whom you subscribe:
 - f. Name of program(s) involved:
7. Briefly describe your complaint and include the resolution you are seeking. If applicable, provide a full description of the telecommunications equipment or customer premises equipment (CPE) and/or the telecommunications service about which the complaint is made, and the date or dates on which the complaint either purchased, acquired or used, or attempted to purchase, acquire or use the telecommunications equipment, CPE or telecommunications service about which the complaint is being made. **requesting for you to please make them provide captions for future weather segments, emergency or not. Requesting that FCC makes them accountable for accessibility to everyone.**