

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0017295940
 File Number:
 0000082865
 Submit Date:
 09/30/2019
 Call Sign:
 WSBB
 Facility ID:
 64368
 City:

 NEW SMYRNA BEACH
 State:
 FL

 Service:
 Full Power AM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 Date:
 09/30/2019
 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.	EEO Report - WSBB Renewal 2019
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

DIEGEL COMMUNICATIONS, LLC229 CANAL+1 (386)SKIPDIEGEL@DIEGELCOMMUNICATIONS.LLCDoing Business As: DIEGEL DOMMUNICATIONS, LLCSTREET428-9091COMNEW SMYRNA BEACH, FL 32168 United StatesBEACH, FL 32168 United States	Applicant	Address	Phone	Email	Applicant Type
	COMMUNICATIONS, LLC Doing Business As: DIEGEL	STREET NEW SMYRNA BEACH, FL 32168	()		LLC

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	Dawn M. Sciarrino , Esq SCIARRINO & SHUBERT, PLLC	4601 N. Fairfax Drive Suite 1200 Arlington, VA 22203 United States	+1 (202) 256- 9551	DAWN@SCIARRINOLAW. COM	Legal Representative

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	64368	WSBB	NEW SMYRNA BEACH	FL	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?	Yes

Question

Clement

F. Diegel

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 delay09/30
/2019Certified DateOg/20
Member

Authorized Party Name

Attachments

No Attachments.