

(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0010493039**

File Number: **0000090639**

Submit Date: **11/21/2019**

Call Sign: **WBAM-FM**

Facility ID: **16379**

City: **MONTGOMERY**

State: **AL**

Service: **Full Power FM**

Purpose: **EEO Report**

Status: **Received**

Status Date: **11/21/2019**

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
Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
BLUEWATER BROADCASTING COMPANY LLC Doing Business As: BLUEWATER BROADCASTING COMPANY LLC	4101-A WALL STREET MONTGOMERY, AL 36106 United States	+1 (305) 530-1322	RPETERS@BLUEWATERBROADCASTING.COM	LLC

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
M. SCOTT JOHNSON , Esq. . LEGAL COUNSEL BLUEWATER BROADCASTING COMPANY LLC	1300 N. 17th St. 11th Floor Arlington, VA 22209 United States	+1 (703) 812-0400	sjohnson@fhhlaw.com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
70356	WJWZ	WETUMPKA	AL	No
43628	WQKS-FM	MONTGOMERY	AL	No
43633	WGMP	MONTGOMERY	AL	No
16379	WBAM-FM	MONTGOMERY	AL	No
189524	WACV	COOSADA	AL	Yes

Program Report Questions

Section	Question	Response
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<b>Discrimination Complaints</b>	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
<b>Full-time Employees</b>	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
Richard H. Pestrichelli	MANAGER

**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	11/21/2019
Certified Title	Manager
Authorized Party Name	Richard H. Pestrichelli

**Attachments**

File Name	Uploaded By	Attachment Type	Description	Upload Status
<a href="#">Bluewater 2018 Public File Report.pdf</a>	Applicant	EEO Public File Report	2018 PUBLIC FILE REPORT	Done with Virus Scan and/or Conversion
<a href="#">Bluewater 2019 Public File Report.pdf</a>	Applicant	EEO Public File Report	2019 PUBLIC FILE REPORT	Done with Virus Scan and/or Conversion
<a href="#">Bluewater EEO Narrative.pdf</a>	Applicant	Narrative Statement	EEO Narrative Statement	Done with Virus Scan and/or Conversion