

(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0001843697** File Number: **0000129178** Submit Date: **12/02/2020** Call Sign: **WDPM-DT** Facility ID: **83740** 

City: MOBILE State: AL

Service: Full Service Television Purpose: EEO Report Status: Received Status Date: 12/02/2020 Filing Status:

**Active** 

## General Information

Section	Question	Response
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
WORD OF GOD FELLOWSHIP, INC	Arnold Torres 3901 HIGHWAY 121 SOUTH BEDFORD, TX 76021 United States	+1 (817) 571- 1229	ARNOLD. TORRES@DAYSTAR.COM	NFP

# **Contact Representatives**

Contact Name	Address	Phone	Email	Contact Type
RICHARD C GOETZ BROADCAST CONSULTANT RL MEDIA SYSTEMS	Richard Goetz 135 N COUNTRY CLUB DR HENDERSONVILLE, TN 37075 United States	+1 (615) 826- 0792	RICKG@RLMEDIASYSTEMS. COM	Technical Representative
Robert L OLENDER , ESQ KOERNER & OLENDER P.C.	Robert L Olender 7020 Richard Drive Bethesda, MD 20817 United States	+1 (301) 468- 3336	rolender.law@comcast.net	Legal Representative

### **Common Stations**

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
83740	WDPM-DT	MOBILE	AL	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

#### 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	12/02 /2020
Certified Title	President
Authorized Party Name	Marcus D. Lamb

#### **Attachments**

No Attachments.