

## Broadcast Equal Employment Opportunity **Program Report**

Licensee Name, Type and Contact Information

FRN: 0004374534 File Number: 0000081337 Submit Date: 09/13/2019 Call Sign: WCYZ Facility ID: 191546 City: SILVER SPRINGS SHORE State: FL Service: Full Power FM Purpose: EEO Report Status Date: 09/13/2019 Status: Received 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.	WGMA 2019 EEO Report for License Renewal
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

## Licensee Information

Applicant	Address	Phone	Email	Applicant Type
<b>Ricardo D Arroyo</b> <i>Individual</i> Doing Business As: RICARDO D. ARROYO	RICARDO D. ARROYO 308 NORTH SHADOWBAY BLVD, APT 210 LONGWOOD, FL 32779 United States	+1 (407) 830- 0800	fcclaw@rjhayes. com	IND

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	RICARDO D Arroyo Individual Ricardo D. Arroyo	Ricardo D. Arroyo 308 NORTH SHADOWBAY BLVD, APT 210 LONGWOOD, FL 32779 United States	+1 (321) 439- 6064	RDA456@GMAIL. COM	Legal Representative
	Richard J Hayes , Jr . Attorney Richard J. Hayes, Jr., Attorney	Richard J. Hayes, Jr. 27 Water's Edge Drive Lincolnville, ME 04849 United States	+1 (207) 236- 3333	fcclaw@rjhayes. com	Legal Representative

Common	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
Stations	191546	WGMA	SILVER SPRINGS SHORE	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

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 09/13	Certification	Question	Response
Certified Date 09/13		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	
/2019		Certified Date	
Certified Title Individu		Certified Title	Individual
		Authorized Party Name	Ricardo D Arroyo

Attachments

No Attachments.