

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0003015971** | File Number: **0000110569** | Submit Date: **03/31/2020** | Call Sign: **WCVK** | Facility ID: **6569** | City: **BOWLING GREEN** | State: **KY**
 Service: **Full Power FM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **03/31/2020** | 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.	CFMM MARCH 2020 EEO Program Report
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
CHRISTIAN FAMILY MEDIA MINISTRIES, INC. Doing Business As: CHRISTIAN FAMILY MEDIA MINISTRIES, INC.	Bridget Kehrt-Groce PO Box 539 BOWLING GREEN, KY 42104 United States	+1 (270) 781-7326	mail@christianfamilyradio.com	Company

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Bridget Kehrt-Groce Executive Director CHRISTIAN FAMILY MEDIA MINISTRIES, INC.	Bridget Kehrt-Groce PO Box 539 BOWLING GREEN, KY 42104 United States	+1 (270) 781-7326	mail@christianfamilyradio.com	Technical Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
6569	WCVK	BOWLING GREEN	KY	No
81648	WJVK	OWENSBORO	KY	No
172311	WZVK	GLASGOW	KY	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	03/31 /2020
Certified Title	Executive Director
Authorized Party Name	Bridget Kehrt- Groce

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>EEO-2018-19.pdf</u>	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
<u>EEO Narrative Statement 2019.pdf</u>	Applicant	Narrative Statement		Done with Virus Scan and/or Conversion
<u>EEO Narrative Statement 2020.pdf</u>	Applicant	Narrative Statement		Done with Virus Scan and/or Conversion
<u>WCVK WJVK WZVK EEO-2019-20.pdf</u>	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion