

(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0005086111** | File Number: **0000144876** | Submit Date: **05/10/2021** | Call Sign: **WACX** | Facility ID: **60018** | City: **LEESBURG** | State: **FL**  
 Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **05/10/2021** | Filing Status: **Active**

## General Information

Section	Question	Response
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
<b>ASSOCIATED CHRISTIAN TELEVISION SYSTEM, INC.</b> Doing Business As: ASSOCIATED CHRISTIAN TELEVISION SYSTEM, INC.	Claud Bowers 123 E. Central Parkway ALTAMONTE SPRINGS, FL 32701 United States	+1 (407) 263-4040	cwb@superchannel.com	Company

## Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
JAMES A. KOERNER , ESQ. . ATTORNEY KOERNER & OLENDER, P.C.	JAMES A. KOERNER 7020 Richard Drive BETHESDA, MD 20817 United States	+1 (301) 468- 3336	JKOERNER. LAW@COMCAST.NET	Legal Representative
Eric R. Wandel , P.E. . Wavepoint Research, Inc.	Eric R. Wandel PO Box 96 Crane, IN 47502 United States	+1 (812) 453- 2544	eric@wavepointresearch.com	Technical Representative

## Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
168091	WACX-LD	ALACHUA, ETC.	FL	No
60018	WACX	LEESBURG	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?	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
Victor Bowers	Creative Director

**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	05/10 /2021
Certified Title	President
Authorized Party Name	Claud Bowers

**Attachments**

File Name	Uploaded By	Attachment Type	Description	Upload Status
<a href="#"><u>WACX_2018-2019 EEO Report.pdf</u></a>	Applicant	EEO Public File Report	2018-2019 EEO Report	Done with Virus Scan and/or Conversion
<a href="#"><u>WACX_2019-2020 EEO Report.pdf</u></a>	Applicant	EEO Public File Report	2019-2020 EEO Report	Done with Virus Scan and/or Conversion
<a href="#"><u>WACX_OUTREACH.docx</u></a>	Applicant	Narrative Statement	WACX Outreach	Done with Virus Scan and/or Conversion