

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

FRN:
0033631540
File Number:
0000072758
Submit Date:
05/15/2019
Call Sign:
WGOP
Facility ID:
5347
City:

POCOMOKE CITY
State:
MD
State:
State:</

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.	2019 EEO Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
BIRACH BROADCASTING CORPORATION Doing Business As: BIRACH BROADCASTING CORPORATION	Sima Birach, President 21700 NORTHWESTERN HWY STE 1190 TOWER 14 SOUTHFIELD, MI 48075 United States	+1 (248) 557-3500	sima@provide. net	COR

Contact Representatives	Contact Name		Addres	S	Phone		Email		Contact Type
	John C Trent , Esq Counsel Putbrese Hunsaker & Tre C.	ent, P.	200 Sc Street	2. Trent, Esq. buth Church stock, VA 22664 States	+1 (540) 45 7646	;9-	fccman3@sł net	nentel.	Legal Representative
Common Stations	Facility Identifier	Call	Sign	City		State	Time Bro	kerage A	greement
	5347	WGO	OP	POCOMOKE (CITY	MD	No		
Program Report Questions	Section	(Question	ı				Respo	nse
	Discrimination Compla		Have any pending or resolved complaints this license term before any body having jurisdiction under federal, state, territorial alleging unlawful discrimination in the em of the station(s)?) compe Il or loca	tent Il law,	No	
	Full-time Employees		•	ur station employr employees? Cons	•	•		Yes	

those permanently working 30 or more hours a week?

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	05/15 /2019		
Certified Title	President		
Authorized Party Name	Sima Birach		

Attachments

No Attachments.