

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0019526946** | File Number: **0000123419** | Submit Date: **10/01/2020** | Call Sign: **WIRS** | Facility ID: **39887** | City: **YAUCO** | State: **PR**
 Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **10/01/2020** | 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
AMERICA-CV STATION GROUP, INC., DEBTOR-IN-POSSESSION Doing Business As: AMERICA-CV STATION GROUP, INC., DEBTOR-IN-POSSESSION	13001 N.W. 107TH AVE. HIALEAH GARDENS, FL 33018 United States	+1 (305) 592-4141	jorge.salas@americaveve.com	COR

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
FRANCISCO R. MONTERO ATTORNEY FLETCHER, HEALD & HILDRETH, P.L.C.	1300 N. 17TH STREET 11TH FLOOR ARLINGTON, VA 22209 United States	+1 (703) 812-0480	MONTERO@FHHLAW.COM	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
58340	WJPX	SAN JUAN	PR	No
58342	WJWN-TV	SAN SEBASTIAN	PR	No
39887	WIRS	YAUCO	PR	No
58341	WKPV	PONCE	PR	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
Carlos Vasallo	CEO

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	10/01 /2020
Certified Title	CEO
Authorized Party Name	Carlos Vasallo

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>WJPX - WIRS - WJWN - WKPV - 2018-2019 Annual EEO Public File Reports.pdf</u>	Applicant	EEO Public File Report	WJPX - WIRS - WJWN - WKPV - 2018-2019 Annual EEO Public File Report	Done with Virus Scan and/or Conversion
<u>WJPX - WIRS - WJWN - WKPV - 2019-2020 Annual EEO Public File Report.pdf</u>	Applicant	EEO Public File Report	WJPX - WIRS - WJWN - WKPV - 2019-2020 Annual EEO Public File Report	Done with Virus Scan and/or Conversion
<u>WJPX - WIRS - WJWN - WKPV - EEO Narrative.pdf</u>	Applicant	Narrative Statement	WJPX - WIRS - WJWN - WKPV - EEO Narrative	Done with Virus Scan and/or Conversion