



(REFERENCE COPY - Not for submission)

Notification of Consummation

File Number: **0000157834** | Submit Date: **08/23/2021** | Lead Call Sign: **WICL** | FRN: **0015786254**
 Service: **Full Power FM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **08/24/2021** |
 Filing Status: **Active**

General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
WEST VIRGINIA RADIO CORPORATION OF THE ALLEGHENIES Doing Business As: WEST VIRGINIA RADIO CORPORATION OF THE ALLEGHENIES	1251 EARL L. CORE ROAD MORGANTOWN, WV 26505 United States	+1 (304) 554-3900	Isaurborn@wvradio.com	Corporation

Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
Matthew H. McCormick Fletcher, Heald & Hildreth, PLC	Matthew H. McCormick, Esq. 1300 NORTH 17TH STREET 11TH FLOOR ARLINGTON, VA 22209 United States	+1 (703) 812-0400	mccormick@fhhlaw.com	Legal Representative

Consummation Notification Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2021-08-23	0015786254

Consummate the Following Authorizations:

Select all the authorizations in the table below that will **not be consummated**

Call Sign	Facility ID	File Number	Will Not Consummate
WVMD	10657	0000151833	
WEPM	53484	0000151834	
WLTF	53486	0000151835	
W228DU	199987	0000151836	
W229CM	154324	0000151837	
W260BP	78609	0000151838	
WXDC	68204	0000151839	
WDYK	164255	0000151840	
WCMD	49381	0000151841	

WDZN	166026	0000151842
WICL	50058	0000151843
WDZN-FM1	177584	0000151844
WCST	68205	0000151845
W271AT	144777	0000151846

Certification

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND /OR FORFEITURE (U.S. Code, Title 47, §503).	
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	John R Raese <i>Officer</i> 08/23/2021

Attachments

Information not provided.