



(REFERENCE COPY - Not for submission)

Notification of Consummation

File Number: **0000158345** | Submit Date: **09/01/2021** | Lead Call Sign: **WZME** | FRN: **0034803817**
 Service: **Full Service Television** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date:
09/02/2021 | 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 |
|-------------|--|-------------------|--------------------|----------------|
| TV-49, Inc. | Evan Fieldman 26 North Halsted Street Chicago, IL 60661 United States | +1 (312) 705-2600 | efieldman@metv.com | Corporation |

Contact Representatives Information (1)

| Contact Name | Address | Phone | Email | Contact Type |
|---|---|-------------------|------------------|----------------------|
| Matthew S. DelNero <i>Legal Counsel</i> Covington & Burling LLP | Matthew S. DelNero One CityCenter 850 Tenth Street, NW Washington, DC 20001 United States | +1 (202) 662-5543 | mdelnero@cov.com | Legal Representative |

Consummation Notification Details

Details

| Date of Consummation | FRN of Licensee Post-consummation |
|----------------------|-----------------------------------|
| 2021-08-31 | 0019682483 |

Consume the Following Authorizations:

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

| Call Sign | Facility ID | File Number | Will Not Consume |
|-----------|-------------|-------------|------------------|
| WZME | 70493 | 0000152841 | |

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. | Norman Shapiro <i>Director, President, Secretary and Treasurer</i> 09/01/2021 |

Attachments

Information not provided.