



(REFERENCE COPY - Not for submission)

Notification of Consummation

File Number: **0000227453** | Submit Date: **11/22/2023** | Lead Call Sign: **WNTE** | FRN: **0016687865**
Service: **Full Power FM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **11/24/2023** |
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
WNTE-FM-MANSFIELD UNIVERSITY	Andrew Longcore, Ph.D. 222 Allen Hall Mansfield University Mansfield, PA 16933 United States	+1 (570) 662-4710	alongcore@commonwealthu.edu	Not-for-Profit

Contact Representatives Information (3)

Contact Name	Address	Phone	Email	Contact Type
Stephen T. Lovelady , Esq. . Shainis & Peltzman, Chartered	1850 M Street NW Suite 240 Washington, DC 20036 United States	+1 (202) 293-0011	steve@s-plaw.com	Legal Representative
Susan April Marshall , Esq. . Shainis & Peltzman, Chartered	1850 M Street NW Suite 240 Washington, DC 20016 United States	+1 (202) 293-0011	susan@s-plaw.com	Legal Representative
Aaron P. Shainis , Esq. . Shainis & Peltzman, Chartered	1850 M Street NW Suite 240 Washington, DC 20036 United States	+1 (202) 293-0011	aaron@s-plaw.com	Legal Representative

Consummation Notification Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2023-11-22	0016687865

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
WNTE	39817	0000222986	

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.	Suzanne C. Williamson <i>Vice President for University Affairs</i> 11/22/2023

Attachments

Information not provided.