



# (REFERENCE COPY - Not for submission)

## Notification of Consummation

File Number: **0000199751** | Submit Date: **09/13/2022** | Lead Call Sign: **WTIN-TV** | FRN: **0004343323**  
Service: **Full Service Television** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date:  
**09/14/2022** | 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
TELEVICENTRO OF PUERTO RICO, LLC	Jorge Hildago PO Box 362050 SAN JUAN, 00936-2050 Puerto Rico	7877924444	jorge.hidalgo@wapa-tv.com	Limited Liability Company

### Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
SALLY A. BUCKMAN <i>Attorney</i> LERMAN SENTER PLLC	SALLY A. BUCKMAN 2001 L Street, NW SUITE 400 WASHINGTON, DC 20036 United States	+1 (202) 429-8970	SBUCKMAN@LERMANSENTER.COM	Legal Representative

### Consummation Notification Details

#### Details

Date of Consummation	FRN of Licensee Post-consummation
2022-09-13	0004343323

#### 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
WAPA-TV	52073	0000191021	
WNJX-TV	73336	0000191022	
WTIN-TV	26681	0000191023	

### 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.	<b>Mark J. Coleman</b> <i>Authorized Representative</i>  09/13/2022
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**Attachments**

Information not provided.