



Federal Communications Commission

(REFERENCE COPY - Not for submission)
Notification of Consummation

File Number: 0000234702 | Submit Date: 01/03/2024 | Lead Call Sign: WBVR-FM | FRN: 0032920506

Service: Full Power FM | Purpose: Notification of Consummation | Status: Accepted | Status Date: 01/04/2024 |

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
FOREVER COMMUNICATIONS, INC. Doing Business As: FOREVER COMMUNICATIONS, INC.	Christine Hillard 351 Pascoe Blvd Suite 103E Bowling Green, KY 42104 United States	+1 (270) 843-3333	chris@forevercom.com	Corporation

Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
David D Oxenford Wilkinson Barker Knauer LLP	1800 M Street, NW Suite 800N Washington, DC 20036 United States	+1 (202) 783-4141	doxenford@wbklaw.com	Legal Representative

Consummation Notification Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2024-01-01	0032920506

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
WBVR-FM	71244	0000221041	
WLYE-FM	57897	0000221042	
W233CZ	145215	0000221043	
WBGN	27243	0000221044	
WUHU	27242	0000221045	

Certification

Section	Question	Response
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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.	Christine Hillard <i>President</i> 01/03/2024

Attachments

Information not provided.