



(REFERENCE COPY - Not for submission)  
Notification of Consummation

File Number: **0000213953** | Submit Date: **04/17/2023** | Lead Call Sign: **WMBS** | FRN: **0014834477**

Service: **Full Power AM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **04/18/2023**

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
<b>FAYETTE BROADCASTING CORP.</b> Doing Business As: FAYETTE BROADCASTING CORP.	44 SOUTH MT. VERNON AVENUE UNIONTOWN, PA 15401 United States	+1 (724) 438-3900	bmroziak@aol.com	Corporation

### Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
<b>Brian Mroziak</b> Fayette Broadcasting Corp.	44 S. Mt. Vernon Ave. Uniontown, PA 15401 United States	+1 (724) 438-3900	bmroziak@aol.com	Licensee

### Consummation Notification Details

#### Details

Date of Consummation	FRN of Licensee Post-consummation
2023-04-17	0014834477

#### 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
WMBS	21237	0000206102	
W266DB	147302	0000206103	

### 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>Steve Pritts</b> <i>Power of Attorney for Catherine Pritts</i>  04/17/2023

## Attachments

Information not provided.