



(REFERENCE COPY - Not for submission)  
Notification of Consummation

File Number: **0000176186** | Submit Date: **12/01/2021** | Lead Call Sign: **W26FB-D** | FRN: **0018223693**

Service: **Full Service Television** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **12/02/2021** | 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
<b>MEREDITH CORPORATION</b>	Joshua Pila 1716 LOCUST STREET DES MOINES, IA 50309 United States	+1 (515) 284-3000	RegAffairs@meredith.com	Corporation

### Contact Representatives Information (2)

Contact Name	Address	Phone	Email	Contact Type
<b>Michael Basile</b> <i>FCC Counsel</i> Cooley LLP	Michael Basile 1299 Pennsylvania Avenue, NW Suite 700 Washington, DC 20004 United States	+1 (202) 776-2556	mdbasile@cooley.com	Legal Representative
<b>Joshua Pila</b> <i>General Counsel</i> Meredith Corporation	Joshua Pila 425 14th Street NW Atlanta, GA 30318 United States	+1 (515) 284-3000	RegAffairs@meredith.com	Legal Representative

### Consummation Notification Details

#### Details

Date of Consummation	FRN of Licensee Post-consummation
2021-12-01	0018223693

#### 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
WHNS	72300	0000145484	
W15CW-D	72305	0000145485	
W21DV-D	72306	0000145486	
W23EZ-D	72301	0000145487	
W34DX-D	72302	0000145488	
W26FB-D	72304	0000145489	

## 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>John Zieser</b> <i>Chf Development Officer, GC, and Secretary</i>  12/01/2021

## Attachments

Information not provided.