



(REFERENCE COPY - Not for submission)

Notification of Consummation

File Number: **0000233612** | Submit Date: **12/22/2023** | Lead Call Sign: **KKAB** | FRN: **0019682483**
Service: **Full Service Television** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date:
12/29/2023 | 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
TV-49, Inc.	Norman H. Shapiro 26 North Halsted Street Chicago, IL 60661 United States	+1 (312) 705-2600	nshapiro@wciu.com	Corporation

Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
Matthew S. DelNero <i>Legal Counsel</i> Covington & Burling LLP	One CityCenter 850 Tenth Street, NW Washington, DC 20001 United States	+1 (202) 662-5543	mdelnero@cov.com	Legal Representative

Consummation Notification Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2023-12-14	0019682483

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
KVME-TV	83825	0000226420	
NEW	776266	0000226421	
KPWT-LD	185409	0000226422	
KPOM-CD	191793	0000226423	
KCSG-LD	130912	0000226424	
KSFV-CD	191101	0000226425	
W32EQ-D	188699	0000226426	
K15IQ-D	185408	0000226427	
W34ER-D	188796	0000226428	
KKAB	776244	0000226429	
W30EM-D	187644	0000226430	

KHTV-CD	60026	0000226431
WZME	70493	0000226432
K31PZ-D	185934	0000226433
WMLW-TV	68545	0000226434
K08QL-D	127064	0000226435
WZDS-LD	188624	0000226436
WOCV-CD	41074	0000226437
KKEL	776228	0000226438
WDME-CD	168449	0000226439
WOME-LD	187412	0000226440
KKAD	776239	0000226441
KKAC	776230	0000226442
WNWT-LD	22797	0000226443
NEW	776229	0000226444
K20OO-D	182084	0000226445
WJLP	86537	0000226446

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.	Norman H Shapiro <i>Director, President, Secretary and Treasurer</i> 12/22/2023

Attachments

Information not provided.