



(REFERENCE COPY - Not for submission)

Notification of Consummation

File Number: **0000191012** | Submit Date: **05/19/2022** | Lead Call Sign: **WGCM-FM** | FRN: **0026299602**
 Service: **Full Power FM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **05/23/2022** |
 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
JLE, Incorporated	Lisa Stiglets. President PO Box 2639 Gulfport, MS 39505 United States	+1 (228) 896-5500	Lstiglets@kicker108.com	Corporation

Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
John C Trent , Esq . <i>Counsel</i> Putbrese Hunsaker & Trent, PC	John C. Trent, Esq. 200 South Church Street Woodstock, VA 22664 United States	+1 (540) 459-7646	fccman3@shentel.net	Legal Representative

Consummation Notification Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2022-05-19	0026299602

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
WGCM-FM	19070	0000179766	
WGCM	31216	0000179767	
WZNF	63486	0000179768	

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.	Lisa Stiglets <i>President</i> 05/19/2022
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Attachments

Information not provided.