



(REFERENCE COPY - Not for submission)

Notification of Consummation

File Number: **0000178157** | Submit Date: **12/29/2021** | Lead Call Sign: **W300CO** | FRN: **0022644066**
Service: **FM Translator** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **12/30/2021** |
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
SPRING ARBOR UNIVERSITY Doing Business As: SPRING ARBOR UNIVERSITY	RADIO STATIONS WSAE/WJKN-FM 106 E. MAIN STREET SPRING ARBOR, MI 49283 United States	+1 (517) 750-6540	tom. davis@arbor. edu	Private Not-for-Profit Educational Institution

Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
MATTHEW H. MCCORMICK Fletcher, Heald & Hildreth, P.L.C.	1300 NORTH 17TH STREET 11TH FLOOR ARLINGTON, VA 22209 United States	+1 (703) 812-0400	MCCORMICK@FHHLAW.COM	Legal Representative

Consummation Notification Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2021-12-28	0022644066

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
W300CO	145494	0000157541	

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.	Dawn I. Schnitkey <i>VP of Finance and Administration</i> 12/29/2021
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Attachments

Information not provided.