

# (REFERENCE COPY - Not for submission) Notification of Consummation

File Number: 0000188536 | Submit Date: 04/01/2022 | Lead Call Sign: WTHV-LD | FRN: 0018223693

Service: Low Power Digital TV Purpose: Notification of Consummation Status: Accepted Status Date: 04/01/2022

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               |
|----------------------------------|--|-----------------------|-----------------------------|------------------------------|
| Gray Television Licensee,<br>LLC | 4370 Peachtree Road,<br>NE<br>Atlanta, GA 30319<br>United States | +1 (202) 255-<br>9298 | robert.<br>folliard@gray.tv | Limited Liability<br>Company |

## Contact Representatives Information (1)

| Contact Name                          | Address  | Phone             | Email              | Contact Type         |
|---------------------------------------|--|-------------------|--------------------|----------------------|
| <b>Joan Stewart</b><br>Wiley Rein LLP | 2050 M Street, NW<br>Washington, DC 20036<br>United States | +1 (202) 719-7438 | jstewart@wiley.law | Legal Representative |

### Consummation Notification Details

#### **Details**

| Date of Consummation | FRN of Licensee Post-consummation |
|----------------------|-----------------------------------|
| 2022-03-08           | 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 |
|-----------|-------------|-------------|---------------------|
| WTHV-LD   | 10593       | 0000180337  |                     |

#### 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.  | Robert Folliard , III . Assistant Secretary 04/01/2022 |

#### **Attachments**