

**Consummation Notice**Read [Instructions/FAQ](#) before filling out formFOR COMMISSION USE ONLY  
FILE NO.**Section I - General Information**

1.	Legal Name of the Applicant STEVE J. FITZPATRICK, ESQ. AS RECEIVER										
	Mailing Address BROWNING, KALECZYC, BERRY & HOVEN, P.C. LIBERTY CENTER, SUITE 302, 9 THIRD STREET NORTH										
	City GREAT FALLS	State or Country (if foreign address) MT	Zip Code 59401 -								
	Telephone Number (include area code) 4064430041		E-Mail Address (if available) STEVEF@BKBH.COM								
	FCC Registration Number: 0027579499	Call Sign KEIN	Facility ID Number 56664								
2.	Contact Representative (if other than licensee/permittee) JOSEPH A. GODLES		Firm or Company Name GOLDBERG GODLES WIENER & WRIGHT, LLP								
	Mailing Address 1025 CONNECTICUT AVE., NW STE. 1000										
	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20036 -								
	Telephone Number (include area code) 2024294900		E-Mail Address (if available) JGODLES@G2W2.COM								
3.	Purpose: <input checked="" type="radio"/> Consummation Notice <input type="radio"/> Extension of Consummation <input type="radio"/> Notification of Non-consummation										
4.	Consummation for: <input checked="" type="radio"/> Assignment of License and/or Permit <input type="radio"/> Transfer of Control										
5.	Lead Station File Number: BAL - 20190809AAS		Lead Facility ID: 56664								
6.	<table><tr><td>File Number</td><td>Facility ID</td><td>Call Sign</td><td>Will not Consummate</td></tr><tr><td>BAL-20190809AAS</td><td>56664</td><td>KEIN</td><td><input type="checkbox"/></td></tr></table>			File Number	Facility ID	Call Sign	Will not Consummate	BAL-20190809AAS	56664	KEIN	<input type="checkbox"/>
File Number	Facility ID	Call Sign	Will not Consummate								
BAL-20190809AAS	56664	KEIN	<input type="checkbox"/>								
7.	Date of consummation: 9/24/2019										
8.	FRN of the Licensee (post-consummation):										

I hereby certify that the referenced assignment of license/transfer of control was consummated within the required time period, on the date indicated in #7 above.

Typed or Printed Name of Person Signing STEVE J. FITZPATRICK	Typed or Printed Title of Person Signing RECEIVER
Signature	Date 9/25/2019

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Informal Menu

# **Federal Communications Commission**

**FCC MB - CDBS Electronic Filing**

**Account number: 441151**

**Description: KEIN CONSUMMATION**

**Successfully filed at Sep 25 2019 11:41AM**

**Based on the information supplied, no fee is required.**

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