



# (REFERENCE COPY - Not for submission)

## Notification of Consummation

File Number: **0000161924** | Submit Date: **09/30/2021** | Lead Call Sign: **WTVD** | FRN: **0013597448**  
Service: **Full Service Television** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date:  
**10/01/2021** | 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
<b>WTVD TELEVISION, LLC</b> Doing Business As: WTVD TELEVISION, LLC	John W. Zucker 77 WEST 66TH STREET, 16TH FLR NEW YORK, NY 10023 United States	+1 (212) 456-7777	john.w.zucker@abc.com	Limited Liability Company

### Contact Representatives Information (3)

Contact Name	Address	Phone	Email	Contact Type
<b>Susan Fox</b> The Walt Disney Company	425 3rd Street SW Suite 1100 Washington, DC 20024 United States	+1 (202) 222-4780	Susan.Fox@disney.com	Legal Representative
<b>William J. Getz</b> <i>Consulting Engineer</i> Carl T. Jones Corporation	7901 Yarnwood Court Springfield, VA 22153 United States	+1 (703) 569-7704	wgetz@ctjc.com	Technical Representative
<b>Grace Kavadoy</b> ABC, Inc.	77 W 66th St., 16th FL. New York, NY 10023 United States	+1 (212) 456-6686	Grace.Kavadoy@disney.com	Legal Representative

### Consummation Notification Details

#### Details

Date of Consummation	FRN of Licensee Post-consummation
2021-09-26	0030871438

#### 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
WTVD	8617	0000146358	

### Certification

Section	Question	Response
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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.	<b>Susan Fox</b> <i>SVP, Government Relations</i>  09/30/2021

Attachments

Information not provided.