



# (REFERENCE COPY - Not for submission)

## Notification of Consummation

File Number: **0000165376** | Submit Date: **11/01/2021** | Lead Call Sign: **KZEZ** | FRN: **0018603050**  
Service: **Full Power AM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **11/01/2021** |  
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>TRI-STAR MEDIA, LLC</b> Doing Business As: KZEZ (AM)	Ray Carpenter 115 East 400 South ST. GEORGE, UT 84770 United States	+1 (435) 656-0253	C.RAY@SKYVIEWTECH.COM	Limited Liability Company

### Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
<b>E. Morgan Skinner , Jr. .</b> <i>Managing Partner</i> ROCKWELL MEDIA SERVICES, LLC	PO Box 1194 ST. GEORGE, UT 84771 United States	+1 (435) 628-1000	MORGAN@ROCKWELLMEDIA.NET	Broadcast Consultant

### Consummation Notification Details

#### Details

Date of Consummation	FRN of Licensee Post-consummation
2021-10-30	0018603050

#### 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
KZEZ	160278	0000145956	
K274CQ	143400	0000145957	
K264CT	201450	0000145958	

### 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.	<b>Ray Carpenter</b> <i>President</i>  11/01/2021
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**Attachments**

Information not provided.