



(REFERENCE COPY - Not for submission)

Notification of Consummation

File Number: **0000184402** | Submit Date: **02/04/2022** | Lead Call Sign: **KGHT** | FRN: **0031734734**
Service: **Full Power FM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **02/07/2022** |
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
BS&T WIRELESS, INC. Doing Business As: BS&T WIRELESS, INC.	SIMON T PO Box 1099 SANTA MONICA, CA 90406 United States	+1 (858) 456-7890	simon@simont.com	Corporation

Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
NANCY A. ORY <i>ATTORNEY</i> LERMAN SENTER PLLC	NANCY ORY 2001 L STREET, NW SUITE 400 WASHINGTON, DC 20036 United States	+1 (202) 429-8970	NORY@LERMANSENTER.COM	Legal Representative

Consummation Notification Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2022-02-04	0031734734

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
KGHT	162386	0000177446	
K226BV	156568	0000177447	
K226CD	156547	0000177448	
K261EG	156601	0000177449	
KTND	170489	0000177450	
K226BU	156607	0000177451	

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.	Simon T Legal Last Name is Single Letter T <i>President</i> 02/04/2022

Attachments

Information not provided.