



(REFERENCE COPY - Not for submission)
Notification of Consummation

File Number: **0000189949** | Submit Date: **05/03/2022** | Lead Call Sign: **KEVU-CD** | FRN: **0006281562**

Service: **Digital Class A** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **05/04/2022**

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 |
|--------------------------------------|--|-------------------|-----------------|----------------|
| CALIFORNIA OREGON BROADCASTING, INC. | PATRICIA C. SMULLIN PO Box 1489 MEDFORD, OR 97501 United States | +1 (541) 779-5555 | admin@kobi5.com | Corporation |

Contact Representatives Information (1)

| Contact Name | Address | Phone | Email | Contact Type |
|----------------------------------|--|-------------------|------------------|----------------------|
| Kathleen Kirby WILEY REIN LLP | 2050 M Street, NW Washington, DC 20036 United States | +1 (202) 719-3360 | kkirby@wiley.law | Legal Representative |

Consummation Notification Details

Details

| Date of Consummation | FRN of Licensee Post-consummation |
|----------------------|-----------------------------------|
| 2022-05-03 | 0006281562 |

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 |
|-----------|-------------|-------------|---------------------|
| KEVU-CD | 8241 | 0000185509 | |
| K19GH-D | 8257 | 0000185510 | |
| K14MQ-D | 8312 | 0000185511 | |
| K35MS-D | 8318 | 0000185512 | |
| K30BN-D | 8246 | 0000185513 | |
| K33NY-D | 8316 | 0000185514 | |
| K32FI-D | 8302 | 0000185515 | |
| K14GW-D | 8306 | 0000185516 | |

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. | Patricia C. Smullin <i>President</i> 05/03/2022 |

Attachments

Information not provided.