



(REFERENCE COPY - Not for submission)
Notification of Consummation

File Number: **0000142927** | Submit Date: **04/05/2021** | Lead Call Sign: **K282BZ** | FRN: **0008214256**

Service: **Full Power AM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **04/05/2021**

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
HENDERSON BROADCASTING COMPANY, L.P. Doing Business As: HENDERSON BROADCASTING COMPANY, L.P.	904 ASPEN ROAD GAINESVILLE, TX 76240 United States	+1 (940) 665-5576	PHENDERSON@KNTXRADIO.COM	Limited Partnership

Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
Matthew H. McCormick FLETCHER HEALD & HILDRETH, PLC	1300 N. 17TH STREET 11TH FLOOR ARLINGTON, VA 22209 United States	+1 (703) 812-0438	MCCORMICK@FHHLAW.COM	Legal Representative

Consummation Notification Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2021-04-02	0008214256

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
KNTX	6561	0000136381	
K282BZ	201417	0000136382	

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.

Pamela Henderson
Member of General Partner

04/02/2021

Attachments

Information not provided.