



(REFERENCE COPY - Not for submission)

Notification of Consummation

File Number: **0000189950** | Submit Date: **05/03/2022** | Lead Call Sign: **K19GH-D** | 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

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

Attachments

Information not provided.