



(REFERENCE COPY - Not for submission)

Notification of Consummation

File Number: **0000203500** | Submit Date: **11/14/2022** | Lead Call Sign: **KFAR** | FRN: **0026168302**
 Service: **Full Power AM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **11/14/2022** |
 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
ROB INGSTAD LICENSES, LLC Doing Business As: ROB INGSTAD LICENSES, LLC	529 5TH AVENUE SUITE 200 FAIRBANKS, AK 99701 United States	+1 (701) 890-0085	robingstad@gmail.com	Limited Liability Company

Contact Representatives Information (2)

Contact Name	Address	Phone	Email	Contact Type
Edward De La Hunt <i>CONSULTING ENGINEER</i> DelaHunt Consulting	PO Box 1021 Bemidji, MN 56619 United States	+1 (218) 444-1025	EDDELAHUNT@UNITELC.COM	Technical Representative
Dawn Sciarrino <i>Managing Member</i> SCIARRINO & SHUBERT, PLLC	330 Franklin Road Suite 135A-133 Brentwood, TN 37027 United States	+1 (202) 256-9551	DAWN@SCIARRINOLAW.COM	Legal Representative

Consummation Notification Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2022-11-10	0026168302

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
KFAR	6438	0000203001	
KTDZ	69405	0000203002	
KXLR	49622	0000203003	
KYSC	77906	0000203004	
K248DK	202142	0000203005	

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.	Stacy L Ingstad <i>The Robert J. Ingstad Estate, Stacy L. Ingstad, Personal Representative</i> 11/14/2022

Attachments

Information not provided.