



# (REFERENCE COPY - Not for submission)

## Notification of Consummation

File Number: **0000163455** | Submit Date: **10/12/2021** | Lead Call Sign: **K259AE** | FRN: **0005046875**

Service: **Full Power AM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **10/12/2021**

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
GRANTS PASS BROADCASTING CORPORATION	888 ROGUE RIVER HIGHWAY GRANTS PASS, OR 97527 United States	+1 (541) 476-6608	kajo@kajo.com	Corporation

### Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
Jessica A Rogers <i>Attorney</i> LUVAAS COBB	777 High Street #300 EUGENE, OR 97440 United States	+1 (541) 484-9292	JROGERS@LUVAASCOBB.COM	Legal Representative

### Consummation Notification Details

#### Details

Date of Consummation	FRN of Licensee Post-consummation
2021-09-03	0005046875

#### 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
KAJO	24822	0000152214	
K251AX	24825	0000152215	
K259AE	24827	0000152216	
KLDR	24821	0000152217	
KRRM	60215	0000152218	
K283AE	24826	0000152219	

### 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.	<b>Carl Wilson</b> <i>President</i>  10/12/2021

Attachments

Information not provided.