



# (REFERENCE COPY - Not for submission)

## Notification of Consummation

File Number: **0000147297** | Submit Date: **05/26/2021** | Lead Call Sign: **KCNC-TV** | FRN: **0004425773**

Service: **Full Service Television** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **05/28/2021** | 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 |
|--|---|-------------------|----------------|----------------|
| <b>CBS TELEVISION STATIONS INC.</b><br>Doing Business As: CBS TELEVISION STATIONS INC. | Daniel G. Ryson<br>2020 M. St., NW -<br>Licensing DEPT<br>Washington, DC 20036<br>United States | +1 (202) 457-4505 | dryson@cbs.com | Corporation    |

### Contact Representatives Information (1)

| Contact Name   | Address   | Phone             | Email                 | Contact Type         |
|--|---|-------------------|-----------------------|----------------------|
| <b>Nancy A. Ory</b><br><i>Attorney</i><br>Lerman Senter PLLC | 2001 L Street, NW<br>Suite 400<br>Washington, DC 20036<br>United States | +1 (202) 416-6791 | nory@lermansenter.com | Legal Representative |

### Consummation Notification Details

#### Details

| Date of Consummation | FRN of Licensee Post-consummation |
|----------------------|-----------------------------------|
| 2021-05-26           | 0004425773                        |

#### 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 |
|-----------|-------------|-------------|------------------|
| KCNC-TV   | 47903       | 0000145578  |                  |
| WFOR-TV   | 47902       | 0000145579  |                  |

### 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.  | <b>Keith R. Murphy</b><br><i>Authorized Representative</i><br><br>05/26/2021 |

**Attachments**

Information not provided.