



# (REFERENCE COPY - Not for submission)

## Notification of Consummation

File Number: **0000155610** | Submit Date: **08/02/2021** | Lead Call Sign: **K28OY-D** | FRN: **0030884894**Service: **Full Service Television** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date:  
**08/05/2021** | 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
<b>KVOA LICENSE LLC</b> Doing Business As: KVOA LICENSE LLC	PO Box 909 Quincy, IL 62306 United States	+1 (217) 223- 5100	bdreasler@quincymedia. com	Limited Liability Company

### Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
<b>Elizabeth E. Spainhour</b> Brooks Pierce	150 Fayetteville Street Raleigh, NC 27601 United States	+1 (919) 839- 0300	espainhour@brookspierce. com	Legal Representative

### Consummation Notification Details

#### Details

Date of Consummation	FRN of Licensee Post-consummation
2021-08-02	0030884894

#### 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
KVOA	25735	0000145325	
K28OY-D	25737	0000145326	
K04QP-D	168403	0000145327	

### 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>Elizabeth E. Spainhour</b> <i>Outside Legal Counsel</i>  08/02/2021
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**Attachments**

Information not provided.