



(REFERENCE COPY - Not for submission)
Notification of Consummation

File Number: **0000179661** | Submit Date: **01/11/2022** | Lead Call Sign: **K09YE-D** | FRN: **0023632631**

Service: **Full Service Television** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date:
01/12/2022 | 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
ZOLO BROADCASTING LLC Doing Business As: ZOLO BROADCASTING LLC	525 Junction Road Madison, WI 53717-1799 United States	+1 (608) 664- 4000	mark. barber@tdstelecom. com	Limited Liability Company

Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
F. WILLIAM LEBEAU HOLLAND & KNIGHT LLP	800 17TH STREET, N. W. SUITE 1100 WASHINGTON, DC 20006 United States	+1 (202) 862- 5965	BILL.LEBEAU@HKLAW. COM	Legal Representative

Consummation Notification Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2022-01-01	0023632631

Consummate the Following Authorizations:

Select all the authorizations in the table below that will **not be consummated**

Call Sign	Facility ID	File Number	Will Not Consummate
KOHD	166534	0000171167	
KBNZ-LD	35384	0000171168	
K04BJ-D	36178	0000171169	
K09YE-D	36173	0000171170	
K34AI-D	36175	0000171171	

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.	Joel Dohmeier <i>Vice President</i> 01/11/2022

Attachments

Information not provided.