



File Number: **0000234604** | Submit Date: **01/02/2024** | Lead Call Sign: **WPXN-TV** | FRN: **0003720042**
Service: **Full Service Television** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date:
01/04/2024 | 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
ION MEDIA LICENSE COMPANY, LLC	David Giles c/o Scripps Media, Inc. 312 Walnut Street, 28th Floor Cincinnati, OH 45202 United States	+1 (513) 977-3000	dave.giles@scripps.com	Limited Liability Company

Contact
Representatives
Information (2)

Contact Name	Address	Phone	Email	Contact Type
David Giles SVP, Deputy General Counsel, Chief Ethics Officer The E.W. Scripps Company	David Giles 312 Walnut Street 28th Floor Cincinnati, OH 45202 United States	+1 (513) 977-3000	dave.giles@scripps.com	Legal Representative
Henry Wendel FCC Counsel Cooley LLP	Henry Wendel 1299 Pennsylvania Avenue, NW Suite 700 Washington, DC 20004 United States	+1 (202) 776-2943	hwendel@cooley.com	Legal Representative

Consummation
Notification
Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2024-01-01	0003720042

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
KILM	63865	0000225520	
KWPX-TV	56852	0000225521	
WZRB	136750	0000225522	
WXPX-TV	6601	0000225523	
WFPX-TV	21245	0000225524	
KPXR-TV	21156	0000225525	

WIPL	48408	0000225526
WNPX-TV	28468	0000225527
WPXR-TV	70251	0000225528
WPXM-TV	48608	0000225529
WRBU	57221	0000225530
WPXN-TV	73356	0000225531

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.	William Appleton <i>Officer</i> 01/02/2024

Attachments

Information not provided.