

(REFERENCE COPY - Not for submission) Notification of Consummation

File Number: 0000212587

Submit Date: 03/16/2023 | Lead Call Sign: KFMN | FRN: 0004330817

Service: Full Power FM

Filing Status: Active

Purpose: Notification of Consummation

Status: Accepted

Status Date: **03/17/2023**

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
FM 97 ASSOCIATES Doing Business As: FM 97 ASSOCIATES	P. O. BOX 1566 LIHUE, HI 96766 United States	+1 (808) 246- 1197	frontdesk@fm97radio. com	General Partnership

Contact Representatives Information (2)

Contact Name	Address	Phone	Email	Contact Type
Nancy A. Ory Attorney Lerman Senter PLLC	Nancy A. Ory Lerman Senter PLLC 2001 L Street, NW, Suite 400 Washington, DC 20036 United States	+1 (202) 416- 6791	NORY@LERMANSENTER. COM	Legal Representative
Russell Wada FM 97 ASSOCIATES	P. O. BOX 1566 LIHUE, HI 96766 United States	+1 (808) 246- 1197	frontdesk@fm97radio.com	Station Engineer

Consummation **Notification Details**

Details

Date of Consummation	FRN of Licensee Post-consummation
2023-03-15	0004330817

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
KFMN	21843	0000206746	
KFMN-FM1	21844	0000206747	

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.	John C Wada General Partner 03/16/2023

Attachments

Information not provided.