



(REFERENCE COPY - Not for submission)

Notification of Consummation

File Number: **0000190570** | Submit Date: **05/12/2022** | Lead Call Sign: **KSLV-FM** | FRN: **0032394058**
 Service: **Full Power FM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **05/13/2022** |
 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
SAN LUIS VALLEY BROADCASTING, INC. Doing Business As: SAN LUIS VALLEY BROADCASTING, INC.	109 Adams St. MONTE VISTA, CO 81144 United States	+1 (719) 852-3591	bob@965thefoxfm. com	Corporation

Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
Mary O'Connor Wilkinson Barker Knauer, LLP	1800 M Street, NW Suite 800N Washington, DC 20036 United States	+1 (202) 783- 4141	moconnor@wbklaw. com	Legal Representative

Consummation Notification Details

Details

Date of Consummation	FRN of Licensee Post-consummation
2022-05-12	0009962804

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
KYDN	58901	0000190140	
K267BQ	154525	0000190141	
KBGV	58903	0000190142	
KSLV-FM	164123	0000190143	

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.	Evelyn Goad <i>President</i> 05/12/2022
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Attachments

Information not provided.