

# (REFERENCE COPY - Not for submission) Notification of Consummation

File Number: 0000160030 | Submit Date: 09/22/2021 | Lead Call Sign: K31QA-D | FRN: 0018223693

Service: Low Power Digital TV Purpose: Notification of Consummation Status: Accepted Status Date: 09/23/2021

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
Gray Television Licensee, LLC	4370 Peachtree Road, NE Atlanta, GA 30319 United States	+1 (404) 266- 8333	robert. folliard@gray.tv	Limited Liability Company

#### Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
<b>Joan Stewart</b> Wiley Rein LLP	1776 K Street, NW Washington, DC 20006 United States	+1 (202) 719-7438	jstewart@wiley.law	Legal Representative

#### Consummation Notification Details

#### **Details**

Date of Consummation	FRN of Licensee Post-consummation
2021-09-22	0018223693

#### **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
WTSG-LD	186162	0000152338	
K35PO-D	186094	0000152339	
K33MW-D	186443	0000152340	
K29OE-D	186458	0000152341	
K19KE-D	186356	0000152342	
K18NW-D	187460	0000152343	
K31QA-D	186051	0000152344	
K28QT-D	186119	0000152345	
K15MY-D	186060	0000152346	
K30RA-D	186459	0000152347	
K29OF-D	186050	0000152348	

K22OV-D	186061	0000152349
K20PB-D	187437	0000152350

### 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.	Robert Folliard , III . Assistant Secretary 09/22/2021

### **Attachments**

Information not provided.