Approved by OMB (Office of Management and Budget) 3060-0031
March 2019

Federal Communications Commission

(REFERENCE COPY - Not for submission)
Notification of Consummation

File Number: **0000160034** | Submit Date: **09/22/2021** | Lead Call Sign: **K29OF-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
Joan Stewart 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.