

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0031 (September 2004)	FOR FCC USE ONLY
Consummation Notice Read Instructions/FAQ before filling out form		FOR COMMISSION USE ONLY FILE NO.

Section I - General Information

1.	Legal Name of the Applicant MENDOCINO COUNTY PUBLIC BROADCASTING																		
	Mailing Address P.O. BOX 1																		
	City PHILO	State or Country (if foreign address) CA	Zip Code 95466 -																
	Telephone Number (include area code) 7078952324		E-Mail Address (if available) KZYX@KZYX.ORG																
	FCC Registration Number: 0008514523	Call Sign KZYX	Facility ID Number 41157																
2.	Contact Representative (if other than licensee/permittee) MELODIE A. VIRTUE, ESQ.		Firm or Company Name GARVEY SCHUBERT BARER																
	Mailing Address 1000 POTOMAC STREET, N.W.																		
	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20007 - 3501																
	Telephone Number (include area code) 2022982527		E-Mail Address (if available) MVIRTUE@GSBLAW.COM																
3.	Purpose: <input checked="" type="radio"/> Consummation Notice <input type="radio"/> Extension of Consummation <input type="radio"/> Notification of Non-consummation																		
4.	Consummation for: <input type="radio"/> Assignment of License and/or Permit <input checked="" type="radio"/> Transfer of Control																		
5.	Lead Station File Number: BTCED - 20130903ACC	Lead Facility ID: 41157																	
6.	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:40%;">File Number</th> <th style="width:20%;">Facility ID</th> <th style="width:20%;">Call Sign</th> <th style="width:20%;">Will not Consume</th> </tr> </thead> <tbody> <tr> <td>BTCED-20130903ACC</td> <td>41157</td> <td>KZYX</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>BTCED-20130903ACD</td> <td>41161</td> <td>KZYZ</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>BTCFT-20130903ACE</td> <td>41159</td> <td>K201HR</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>			File Number	Facility ID	Call Sign	Will not Consume	BTCED-20130903ACC	41157	KZYX	<input type="checkbox"/>	BTCED-20130903ACD	41161	KZYZ	<input type="checkbox"/>	BTCFT-20130903ACE	41159	K201HR	<input type="checkbox"/>
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7.	Date of consummation: 9/11/2013																		
8.	FRN of Assignee/Transferee: 0008514523																		

I hereby certify that the referenced assignment of license/transfer of control was consummated within the required time period, on the date indicated in #7 above.

Typed or Printed Name of Person Signing MELODIE A. VIRTUE, ESQ.	Typed or Printed Title of Person Signing COUNSEL - GARVEY SCHUBERT BARER
Signature	Date 9/12/2013

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits
