

(REFERENCE COPY - Not for submission)

### Commercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323)

File Number: 0000072923 | Submit Date: 2019-05-17 | FRN: 0027197755

Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report Status: Received Status Date:

05/17/2019 Filing Status: Active

#### **Section I - General Information**

### 1. Respondent

FRN	Entity Name	
0027197755	Route 6 Broadcasting Area Partnership	

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
122 North Center Street	Corry	PA	16407	+1 (814) 664- 8694	wwcbproductions@gmail.

## 2. Contact Representative

Name	Organization
Donald Martin	Donald E Martin, P.C.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 8433	Falls Church	VA	22041	+1 (703) 642-2344	dempc@prodigy.net

## 3. Application Filing Fee

Not Applicable

## 4. Nature of Respondent

) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Nature of Respondent	Limited liability company	

(b) Provide the following information about this report:				
Purpose Transfer of control or assignment of license/pe				
"As of" date	05/16/2019			
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.			

# 5. Licensee(s) /Permittees(s) and Station(s)

### /Permit(s)

Licensee/Permittee Name	FRN
Route 6 Broadcasting Area Partnership	0027197755

Fac. ID No.	Call Sign	City	State	Service
13967	WWCB	CORRY	PA	AM
202535	W231DW	CORRY	PA	FX

### **Section II – Non-Biennial Ownership Information**

### 1. 47 C.F.R. Section 73.3613 and Other Documents

Licensee/Permittee Respondents should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee/Permittee Respondents should select "Not Applicable" in response to this question.

Document Information				
Description of contract or instrument	Limited Partnership Agreement			
Parties to contract or instrument	William Stafford, Rebecca Stafford			
Date of execution	04/2019			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other  Agreement Type: Organizational governance document			

## 2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated partners, non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) or Permittee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) or Permittee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information	Ownership Information		
FRN	0027197755		
Entity Name	Route 6 Broadcasting Area Pa	rtnership	
Address	РО Вох		
	Street 1	122 North Center Street	
	Street 2		

	City	Corry	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code 16407		
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information				
FRN	0027176692	0027176692		
Name	William Stafford	William Stafford		
Address	PO Box			
	Street 1	4060 Ponderosa Drive		
	Street 2			
	City	Edinboro		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	16412		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	General Partner			
Interest Percentages (enter percentage values	Voting	95.0%	Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations  No that do not appear on this report?				

Ownership Information		
FRN	0027176700	
Name	Rebecca Stafford	
Address	РО Вох	
	Street 1	4060 Ponderosa Drive

	Street 2		
	City	Edinboro	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	16412	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Limited Partner		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	5.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations	No
• •	at any interests, including equi	ity, financial, or voting	Yes

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?

If "Yes," provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below. Respondents with a large number (50 or more) of entries to submit should use the spreadsheet option.

NOTE: Spreadsheets must be submitted in a special XML Spreadsheet format with the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please Click Here.

If using the subform, leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA" into the percentage of total assets (Equity Debt Plus) field for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

No

Yes

If "Yes," provide the following information for each such the relationship.

Family Relationships				
FRN	0027176692	Name	William Stafford	
FRN	0027176700	Name	Rebecca Stafford	
Relationship	Spouses			

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If "Yes," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be	
attributed an interest.	

### Certification

Section	Question	Response
Authorized Party to Sign	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 LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: General Partner Exact Legal Title or Name of Respondent: Route 6 Broadcasting Area Partnership Name: William Stafford Phone: 8144404122