



(REFERENCE COPY - Not for submission)

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

File Number: **0000170381** | Submit Date: **2021-11-22** | FRN: **0002624427**  
Purpose: **Commercial Broadcast Stations Biennial Ownership Report** | Status: **Superceded** | Status Date: **04/29/2022**  
Filing Status: **InActive**

Section I - General Information

1. Respondent

FRN		Entity Name			
0002624427		KOB-TV, LLC			

  

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3415 UNIVERSITY AVENUE WEST	ST. PAUL	MN	55114-2099	+1 (651) 642-4334	kshuldes@hbi.com

2. Contact Representative

Name		Organization			
Charles R. Naftalin		Holland & Knight LLP			

  

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
800 17th Street, N.W. Suite #1100	Washington	DC	20006-3906	+1 (202) 457-7040	charles.naftalin@hklaw.com

3. Application Filing Fee

Question	Response
Is this application being submitted without a filing fee?	No

Fees

Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
Biennial	Form 323	MAT	3	95	\$255.00
				Total	\$255.00

4. Nature of Respondent

(a) 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	Biennial
"As of" date	10/01/2021  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) and Station(s)

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name	FRN
KOB-TV, LLC	0002624427

Fac. ID No.	Call Sign	City	State	Service
35313	KOB	ALBUQUERQUE	NM	DTV
35321	KOBF	FARMINGTON	NM	DTV
62272	KOBR	ROSWELL	NM	DTV

Section II – Biennial Ownership Information

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

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations 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 Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select “Not Applicable” in response to this question.

Document Information	
Description of contract or instrument	Amended and Restated By-Laws of Hubbard Broadcasting, Inc.
Parties to contract or instrument	Hubbard Broadcasting, Inc.
Date of execution	10/2011
Date of expiration	No expiration date

<b>Agreement type</b> (check all that apply)	Other <b>Agreement Type:</b> n/a
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Document Information	
<b>Description of contract or instrument</b>	Shareholder Buy-Sell Agreement of Hubbard Broadcasting, Inc.
<b>Parties to contract or instrument</b>	Hubbard Broadcasting, Inc. and Shareholders
<b>Date of execution</b>	10/2011
<b>Date of expiration</b>	No expiration date
<b>Agreement type</b> (check all that apply)	Other <b>Agreement Type:</b> n/a

Document Information	
<b>Description of contract or instrument</b>	COMET Digital Multicast Affiliation Agreement
<b>Parties to contract or instrument</b>	KOB-TV, LLC
<b>Date of execution</b>	07/2016
<b>Date of expiration</b>	07/2022
<b>Agreement type</b> (check all that apply)	Network Affiliation Agreement

Document Information	
<b>Description of contract or instrument</b>	THIS TV Digital Multicast Affiliation Agreement, as amended
<b>Parties to contract or instrument</b>	KOB-TV, LLC
<b>Date of execution</b>	12/2010
<b>Date of expiration</b>	12/2023
<b>Agreement type</b> (check all that apply)	Network Affiliation Agreement

Document Information	
<b>Description of contract or instrument</b>	NBC Affiliation Agreement
<b>Parties to contract or instrument</b>	KOB-TV, LLC
<b>Date of execution</b>	01/2017
<b>Date of expiration</b>	12/2023
<b>Agreement type</b> (check all that apply)	Network Affiliation Agreement

Document Information	
<b>Description of contract or instrument</b>	Amended And Restated Limited Liability Company Agreement of KOB-TV, LLC
<b>Parties to contract or instrument</b>	Member
<b>Date of execution</b>	01/1998
<b>Date of expiration</b>	No expiration date

<b>Agreement type</b> (check all that apply)	Other <b>Agreement Type:</b> n/a
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Document Information	
Description of contract or instrument	Certificate of Formation of KOB-TV, LLC
Parties to contract or instrument	Delaware Secretary of State
Date of execution	11/1996
Date of expiration	No expiration date
<b>Agreement type</b> (check all that apply)	Other <b>Agreement Type:</b> n/a

Document Information	
Description of contract or instrument	Heroes & Icons TV Network Affiliation Agreement
Parties to contract or instrument	KOB-TV, LLC
Date of execution	10/2021
Date of expiration	10/2025
<b>Agreement type</b> (check all that apply)	Network Affiliation Agreement

Document Information	
Description of contract or instrument	TrueReal Affiliation Agreement
Parties to contract or instrument	KOB-TV, LLC
Date of execution	05/2021
Date of expiration	12/2026
<b>Agreement type</b> (check all that apply)	Network Affiliation Agreement

Document Information	
Description of contract or instrument	Defy Affiliation Agreement
Parties to contract or instrument	KOB-TV, LLC
Date of execution	05/2021
Date of expiration	12/2026
<b>Agreement type</b> (check all that apply)	Network Affiliation Agreement

Document Information	
Description of contract or instrument	Newsy Affiliation Agreement
Parties to contract or instrument	KOB-TV, LLC
Date of execution	06/2021
Date of expiration	12/2026
<b>Agreement type</b> (check all that apply)	Network Affiliation Agreement

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) 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) 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			
FRN	0002624427		
Entity Name	KOB-TV, LLC		
Address	PO Box		
	Street 1	3415 UNIVERSITY AVENUE	
	Street 2	WEST	
	City	ST. PAUL	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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	0012312708
Name	STANLEY S. HUBBARD

Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc.	
	Street 2	3415 University Avenue, West	
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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?			Yes

Ownership Information			
FRN	0008494114		
Name	ROBERT W. HUBBARD		
Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc.	
	Street 2	3415 University Avenue, West	
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender, Ethnicity, and Race	Citizenship	US	
	Gender	Male	

Information (Natural Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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?			Yes

Ownership Information			
FRN	0008494148		
Name	Stan E. Hubbard		
Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc.	
	Street 2	3415 University Avenue, West	
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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?			Yes

Ownership Information		
FRN	0019895846	
Name	VIRGINIA A. HUBBARD	
Address	PO Box	

	Street 1	c/o Hubbard Broadcasting, Inc.	
	Street 2	3415 University Avenue, West	
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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?			Yes

Ownership Information			
FRN	0019887967		
Name	KATHRYN H. ROMINSKI		
Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc.	
	Street 2	3415 University Avenue, West	
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	



	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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?			Yes

Ownership Information

FRN	0019887397		
Name	C. THOMAS NEWBERRY		
Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc.	
	Street 2	3415 University Avenue, West	
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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?			Yes

Ownership Information

FRN	0020875472		
Name	Paul L. Yates		
Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc.	
	Street 2	3415 University Avenue, West	

	<b>City</b>	St. Paul	
	<b>State ("NA" if non-U.S. address)</b>	MN	
	<b>Zip/Postal Code</b>	55114-2099	
	<b>Country (if non-U.S. address)</b>	United States	
<b>Listing Type</b>	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer		
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US	
	<b>Gender</b>	Male	
	<b>Ethnicity</b>	Not Hispanic or Latino	
	<b>Race</b>	White	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	0.0%	<b>Jointly Held?</b> No
	<b>Equity</b>	0.0%	
	<b>Total assets (Equity Debt Plus)</b>	0.0%	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			Yes

Ownership Information			
<b>FRN</b>	0005902820		
<b>Name</b>	David A. Jones		
<b>Address</b>	<b>PO Box</b>		
	<b>Street 1</b>	c/o Hubbard Broadcasting, Inc.	
	<b>Street 2</b>	3415 University Avenue, West	
	<b>City</b>	St. Paul	
	<b>State ("NA" if non-U.S. address)</b>	MN	
	<b>Zip/Postal Code</b>	55114-2099	
	<b>Country (if non-U.S. address)</b>	United States	
<b>Listing Type</b>	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer		
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US	
	<b>Gender</b>	Male	
	<b>Ethnicity</b>	Not Hispanic or Latino	
	<b>Race</b>	White	
<b>Interest Percentages</b>	<b>Voting</b>	0.0%	<b>Jointly Held?</b>

(enter percentage values from 0.0 to 100.0)			No
	Equity	0.0%	
	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?			Yes

Ownership Information			
FRN	0022845481		
Name	JAMES A. BARNUM		
Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc.	
	Street 2	3415 University Avenue, West	
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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?			Yes

Ownership Information			
FRN	0022845499		
Name	RYAN M. VANDEWIELE		
Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc.	
	Street 2	3415 University Avenue, West	
	City	St. Paul	

	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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?			Yes

Ownership Information			
FRN	0003915816		
Entity Name	HUBBARD BROADCASTING, INC.		
Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc.	
	Street 2	3415 University Avenue, West	
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member, Owner, Other - Other Interest Holder		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	100.0%	Jointly Held? No
	Equity	100.0%	
	Total assets (Equity Debt Plus)	100.0%	

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?	Yes
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Ownership Information			
FRN	0029107539		
Name	Michelle Donaldson		
Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc.	
	Street 2	3415 University Avenue, West	
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes
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<p>(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?</p> <p>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.</p>	No
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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.

<b>(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?</b>	Yes
If " <u>Yes</u> ," provide the following information for each such the relationship.	

Family Relationships			
FRN	0019895846	Name	VIRGINIA A HUBBARD
FRN	0019887967	Name	KATHRYN H ROMINSKI
Relationship	Siblings		

Family Relationships			
FRN	0019895846	Name	VIRGINIA A HUBBARD
FRN	0008494114	Name	ROBERT W HUBBARD
Relationship	Siblings		

Family Relationships			
FRN	0008494114	Name	ROBERT W HUBBARD
FRN	0019887967	Name	KATHRYN H ROMINSKI
Relationship	Siblings		

Family Relationships			
FRN	0019895846	Name	VIRGINIA A HUBBARD
FRN	0008494148	Name	Stan E Hubbard
Relationship	Siblings		

Family Relationships			
FRN	0012312708	Name	STANLEY S HUBBARD

FRN	0019895846	Name	VIRGINIA A HUBBARD
Relationship	Parent/Child		

Family Relationships			
FRN	0008494114	Name	ROBERT W HUBBARD
FRN	0008494148	Name	Stan E Hubbard
Relationship	Siblings		

Family Relationships			
FRN	0019887967	Name	KATHRYN H ROMINSKI
FRN	0008494148	Name	Stan E Hubbard
Relationship	Siblings		

Family Relationships			
FRN	0012312708	Name	STANLEY S HUBBARD
FRN	0008494114	Name	ROBERT W HUBBARD
Relationship	Parent/Child		

Family Relationships			
FRN	0012312708	Name	STANLEY S HUBBARD
FRN	0019887967	Name	KATHRYN H ROMINSKI
Relationship	Parent/Child		

Family Relationships			
FRN	0012312708	Name	STANLEY S HUBBARD
FRN	0008494148	Name	Stan E Hubbard
Relationship	Parent/Child		

<p><b>(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</b></p> <p>If "<u>Yes</u>," 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.</p>	No
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3. Organizational Chart (Licensees Only)

Attach a flowchart or similar document showing the Licensee’s vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select “N/A” in response to this question.

Section III - Certification

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 LICENSE --OR 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: <b>Vice President</b> Exact Legal Title or Name of Respondent: <b>KOB-TV, LLC</b> Name: <b>Ryan Vandewiele</b> Phone: <b>6516424334</b>  11/22/2021