



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **23337** | Service: **DTV** | Call **WBNG-TV** | Channel:  
ID: | Sign:  
**8 (High VHF)** | File **0000027464**  
Number:  
FRN: **0025018029** | Date **07/10**  
Submitted: **/2017**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>WBNG LICENSE, LLC</b> Doing Business As: WBNG LICENSE, LLC	Brady Dreasler P.O. BOX 909 QUINCY, IL 62306 United States	+1 (217) 223-5100	bdreasler@quincyinc. com	Limited Liability Company

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address	Phone	Email
<b>Tony zumMallen</b> <i>QCommunications, LLC</i>	Tony zumMallen 705B SE Melody LN #314 Lees Summit, MO 64063 United States	+1 (816) 729- 1177	tony@qcom1. com

**Broadcaster  
Information  
and  
Transition  
Plan**

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	No
Briefly describe transition plan	To transition from ch 7 to ch 8. Analysis has indicated that the antenna will work but the lines will require modification. A new transmitter will be needed. A new interim transmission system is needed to provide service during the transition.

**Transmitters**

Section	Question	Response
<b>Transmitter Related Expenses</b>	Do you have transmitter related expenses?	Yes

**Primary  
Transmitter**

**Existing Transmitter Information**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	Platinum
	Year	2006
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	8.0 kW

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	VAXTE -12 R44
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	9.6 kW
	Justification for New Transmitter	Existing transmitter is not tunable to new channel.

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	Yes
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	300 kVA
	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	200.0 feet
	Other Electrical Service	No

	Description	N/A
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	Yes
	Type	Cooling Only
	Size	25 tons
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

**Primary Transmitter**      **Other Transmitter Cost Not Listed**  
Information not provided.

**Interim  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase
	Manufacturer	
	Model	VAXTE-6R44
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	4.4 kW
	Justification for New Transmitter	Interim facility is required to avoid prolonged period of station silence during transition, and station currently has no aux facility to use for interim operation. Extended silent period during transition to new channel is unreasonable.

**Interim  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No

	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	200.0 feet
	Other Electrical Service	No
	Description	N/A
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A
<b>Inside RF System</b>	Is an additional interior RF system required to support this interim transmitter?	Yes

**Interim Transmitter** **Other Transmitter Cost Not Listed**  
Information not provided.

**Antennas**

Section	Question	Response
<b>Antenna Related Expenses</b>	Do you have antenna related expenses?	Yes

**Interim  
Antenna****New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	No
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Other
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	Omni- Directional
	ERP: (Effective Radiated Power)	15.0 kW



Manufacturer	
Model	THV-7
Year	2017
Justification for New Antenna	Interim facility is required to avoid prolonged period of station silence during transition, and station currently has no aux facility to use for interim operation. Extended silent period during transition to new channel is unreasonable.

**Interim Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	B
	Feed Line Size	3 1/8 inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for an antenna?	Yes
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	Yes
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

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**Interim  
Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

Transmission Line	Section	Question	Response
	<b>Transmission Line Related Expenses</b>		Do you have transmission line related expenses?

**Primary Transmission Line**  
**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	Type of change	Utilize Existing
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	Dielectric
	Type	Rigid
	Diameter	3 1/8 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1063 feet per run

**Primary  
Transmission  
Line**

**Other Transmission Line Expenses Not Listed**

<b>Name</b>	<b>Description</b>
<b>Line Refurbishment</b>	Field Report -Resonant Results LTD -It is recommended that the bullets, insulators and watch band springs be replaced from the 3 to 7 adapter and the 23 additional line sections towards the antenna.

**Tower Equipment And Rigging Costs**

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	Yes

**Primary Tower**

**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Move Equipment
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	No
	One or more FM, AM or TV radio broadcaster(s)	N/A
	Others Types of Users	N/A
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1016566
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	42° 03' 31.0" N-
	Longitude (NAD83)	075° 57' 05.0" W-
	Overall Structure Height	789.03 feet
	Support Structure Height	705.04 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1765.07 feet

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	WBNG Television, Inc.
Date Constructed	08/01/1987

**Primary Tower**

**Tower Rigging Costs**

Section	Question	Response
Tower Rigging Costs	Complex Tower	N/A
Helicopter Services Required	Are helicopter services required?	No

**Primary Tower**

**Other Tower Expenses Not Listed**

Name	Description
Tower Modifications	May require tower modifications. Awaiting tower study. Not available at time of submission.

**Outside Professional Services Costs**

Section	Question	Response
<p><b>Outside Project Management Services</b></p>	<p>Do you require outside project management services?</p>	<p>Yes</p>
	<p>Number of Hours</p>	<p>389</p>
	<p>Explanation</p>	<p>Scope &amp; significance of project (QMI has multiple stations repacked) require outside management services to augment existing internal personnel to assist turnkey management of and ensure timely and safe execution of channel relocation.</p>
<p><b>Outside RF consulting Engineering Services</b></p>	<p>Perform engineering study for new channel assignment and antenna development</p>	<p>Yes</p>
	<p>Prepare engineering section of Form FCC Construction Permit Application</p>	<p>Yes</p>
	<p>For Auxiliary Facility</p>	<p>No</p>
	<p>For Main Facility</p>	<p>Yes</p>
	<p>Prepare engineering section of Form FCC License to Cover Application</p>	<p>Yes</p>
	<p>For Auxiliary Facility</p>	<p>No</p>
	<p>For Main Facility</p>	<p>Yes</p>

	Prepare request for Special Temporary Authority	Yes
	Quantity	4
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	4
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
Address transition timing and coordination issues w/ other stations and wireless providers	Yes	
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	Yes



RF exposure measurements	No
Additional Field Engineering Service	No
Number of Days	N/A
Justification	N/A

**Outside Professional Services Costs**      **Other Professional Services Expenses Not Listed**  
Information not provided.

**Other Expenses**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	Yes
	Is Remediation needed?	Yes
<b>Facility Expenses</b>	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
<b>Permit and Filing Costs</b>	Local Zoning	No
	Non-zoning permits	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

**Other  
Expenses**

**Other Expenses Not Listed**

Information not provided.

**Cost  
Information**

**Transmitters**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Interim Transmitter VAXTE-6R44</b>	<b>\$274,800.00</b>	<b>\$0.00</b>		<b>\$0.00</b>	
High VHF - Air Cooled Solid State Transmitter 1.1 . 4.4 kW	\$152,500.00	\$0.00	N/A	N/A	N/A
VHF inside RF system including switching	\$78,900.00	\$0.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$0.00	N/A	N/A	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$0.00	N/A	N/A	N/A
<b>Primary Transmitter VAXTE -12R44</b>	<b>\$517,600.00</b>	<b>\$0.00</b>		<b>\$0.00</b>	
Switchgear - industrial 800 amp	\$38,200.00	\$0.00	N/A	N/A	N/A
Transformer 3 phase/480v - 300 KVA	\$36,800.00	\$0.00	N/A	N/A	N/A
25 Ton system	\$91,500.00	\$0.00	N/A	N/A	N/A
High VHF - Air Cooled Solid State Transmitter 6.5 . 12.5 kW	\$331,500.00	\$0.00	N/A	N/A	N/A
Service entrance 3 phase/800 amp /208 volt	\$14,400.00	\$0.00	N/A	N/A	N/A

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2" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$0.00	N/A	N/A	N/A
<b>Sub-total</b>	\$792,400.00	\$0.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$1,711,412.00	\$428,340.00	N/A	\$0.00	N/A

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### Components

Information not provided.

**Cost Information**

**Antennas**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Interim Antenna THV-7</b>	<b>\$251,480.00</b>	<b>\$207,000.00</b>		<b>\$0.00</b>	
Elbow complex, broadband, at antenna input, per 3 1/8. feedline (if needed)	\$9,340.00	\$0.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$0.00	N/A	N/A	N/A
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$0.00	N/A	N/A	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$0.00	N/A	N/A	N/A
High VHF - High Power Side Mount One Station elliptically or circularly polarized	<i>\$207,000.00</i>	\$207,000.00	Cost of interim antenna not sure why the catalog of costs did not automatically add standardized pricing.	N/A	N/A
<b>Sub-total</b>	<b>\$251,480.00</b>	<b>\$207,000.00</b>	N/A	<b>\$0.00</b>	N/A

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<b>Total for all systems</b>	\$1,711,412.00	\$428,340.00	N/A	\$0.00	N/A
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### **Components**

Information not provided.

**Cost Information**

**Transmission Line**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Transmission Line</b>	<b>\$45,340.00</b>	<b>\$45,340.00</b>		<b>\$0.00</b>	
Line Refurbishment	<i>\$45,340.00</i>	\$45,340.00	Required work on transmission line, Per Resonant Results Ltd field Report dated 3/14 /17.	N/A	N/A
<b>Sub-total</b>	\$45,340.00	\$45,340.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$1,711,412.00	\$428,340.00	N/A	\$0.00	N/A

**Components**

Information not provided.



**Cost Information**

**Tower Equipment and Rigging Costs**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Tower TOWER</b>	<b>\$360,500.00</b>	<b>\$150,000.00</b>		<b>\$0.00</b>	
Tall Tower (greater than 500')	\$210,500.00	\$0.00	N/A	N/A	N/A
Tower Modifications	<i>\$150,000.00</i>	\$150,000.00	Minor Tower reinforcement /modifications, may be necessary. Awaiting tower study finding not available at time of submittal.	N/A	N/A
<b>Sub-total</b>	<b>\$360,500.00</b>	<b>\$150,000.00</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$1,711,412.00</b>	<b>\$428,340.00</b>	N/A	<b>\$0.00</b>	N/A

**Components**

Information not provided.

**Cost Information**

**Outside Professional Services**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Outside Professional Services</b>	<b>\$193,562.00</b>	<b>\$0.00</b>		<b>\$0.00</b>	
Prepare and or review reimbursement form	\$2,630.00	\$0.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$0.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$8,200.00	\$0.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$0.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$14,720.00	\$0.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$0.00	N/A	N/A	N/A

Project management of the transition	\$61,462.00	\$0.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$0.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$0.00	N/A	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$0.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$0.00	N/A	N/A	N/A
<b>Sub-total</b>	\$193,562.00	\$0.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$1,711,412.00	\$428,340.00	N/A	\$0.00	N/A

## Components

Information not provided.

**Cost Information**

**Other Expenses**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$68,130.00</b>	<b>\$26,000.00</b>		<b>\$0.00</b>	
AM Pattern Disturbance -- Impact study	\$7,890.00	\$0.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$0.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$5,000.00</i>	\$5,000.00	Required FCC notification.	N/A	N/A
MVPD Notification of Channel Change	<i>\$5,000.00</i>	\$5,000.00	Required FCC notification.	N/A	N/A
AM Pattern Disturbance -- Remedy	\$21,050.00	\$0.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$0.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$0.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$0.00	N/A	N/A	N/A

Disposal Costs (for equipment and other waste, net of any salvage value)	<b><i>\$3,000.00</i></b>	\$3,000.00	4-6 yard disposal bin on site to capture all waste from on site system integration and tower vendors.	N/A	N/A
Equipment Delivery and Handling Charges	<b><i>\$8,000.00</i></b>	\$8,000.00	Transport, forklift rental and handling fees from staging area to transmitter site.	N/A	N/A
Equipment Storage	<b><i>\$5,000.00</i></b>	\$5,000.00	Expecting multiple staggered equipment deliveries from different vendors and need to store and stage new equipment prior to installation date. Anticipate from 6-24 months of storage time.	N/A	N/A
<b>Sub-total</b>	<b>\$68,130.00</b>	<b>\$26,000.00</b>	N/A	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$1,711,412.00</b>	<b>\$428,340.00</b>	N/A	<b>\$0.00</b>	<b>N/A</b>

## Components

Information not provided.

**Cost Information** **Grand Total**

	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>	<b>Actual Cost</b>
<b>Total for all systems</b>	\$1,711,412.00	\$428,340.00	\$0.00

**Reimbursement Status**

<b>Question</b>	<b>Response</b>
The facility has ceased operating on its pre-auction channel.	No
Construction of final facilities or all necessary modifications are complete.	No
All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator.	No

Certification	Section	Question	Response
	<b>Submission of Estimated Expenses Statements</b>	<p>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), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>	
		<ol style="list-style-type: none"> <li>1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.</li> </ol>	



- 4.** The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 5.** The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 6.** The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
- 7.** The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**Tony zumMallen**  
*President,*  
*QCommunications*

07/10/2017

**Attachments**

Information not provided.