



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **67910** | Service: **DTV** | Call **KDTX-TV** | Channel: **21 (UHF)** |  
 ID: | Sign:  
 File **0000027716**  
 Number:  
 FRN: **0004346060** | Date **07/10**  
 Submitted: **/2017**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
TRINITY BROADCASTING OF TEXAS, INC.	2900 W. AIRPORT FREEWAY IRVING, TX 75062 United States	+1 (972) 313-1333	cmmay@maylawoffices.com	Not-for-Profit

## 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
The Preparer is same as the reimbursement contact.			

## Broadcaster Information and Transition Plan

Question	Response
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<p>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.</p>	<p>Yes</p>
<p>Briefly describe transition plan</p>	<p>Reduce TPO to 50% and remove 1/2 of the xmitter system. Install new SS xmitter system. Add AUX antenna &amp; line to the tower &amp; feed it with a reduced signal from the current xmitter. Remove &amp; replace antenna. Test.</p>

**Transmitters**

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

**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	DCX 2
	Year	2004
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	50 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	HPTV PRLX U32
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	55 kW
	Justification for New Transmitter	See Attached

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	500.0 feet
	Other Electrical Service	Yes
	Description	disconnects, labor, panels

<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	Yes
	Type	Heating and Cooling
	Size	10 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?	Yes
	Size	1000.0 square feet
<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.

**Antennas**

Section	Question	Response
Antenna Related Expenses	Do you have antenna related expenses?	Yes

**Primary  
Antenna**

**Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Owner	Americanm Tower
	Site	N/A
	Is the existing antenna shared with another station or stations?	Yes
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
<b>Existing Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	4
	Number of Panels	16
	Design power capacity in use	80.0 %
	Lower Limit	470.00 MHz
	Upper Limit	800.00 MHz
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	1000.0 kW

Manufacturer	
Model	PHP-36C
Year	2000

**Facility ID's and Call Signs of  
all stations with whom the  
antenna is shared.**

Facility ID	Call Sign
22201	KDAF
42359	KTXD-TV
49326	KDTN



**Primary  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Ownership	Leased
	Owner	American Tower
	Is antenna shared?	Yes
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
<b>New Antenna Manufacturer and Types</b>	Class	Class A
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Broadband Panel
	Number of Stations Supported	4
	Number of Panels/Bays	48
	Lower Limit	490.00 MHz
	Upper Limit	593.00 MHz
	Design power capacity in use	80.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	1000.0 kW
	Manufacturer	
Model	TFU-C4-AP-14 /48H-2-R-T	

Year	2017
Justification for New Antenna	RELOCATING TO NEW SITE.

**Primary Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	Yes
	Type	Additional Module
	Number of channels supported	4
	Frequencies of channels supported	Upper and lower frequency
	Frequency	483.0 MHz - 597.0 MHz
	Do you need a combiner output splitter /switcher for dual feed lines?	No
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Broadband
	Feed Line Size	8 3/16 inches inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No
<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

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Name	Description
COMBINER	Installation

**Transmission  
Line**

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

**Primary  
Transmission  
Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Owner	American Tower
	Site	N/A
	Is the existing transmission line shared with another station or stations?	Yes
	Is Transmission Line in operating condition?	Yes
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1800 feet per run

**Facility ID's and Call Signs of  
all stations with whom the  
transmission line is shared.**

Facility ID	Call Sign
42359	KTXD-TV
22201	KDAF



**Primary  
Transmission  
Line**      **New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	2
	Length	1700 feet per run
	Justification for New Transmission Line	Relocating to new site

**Primary  
Transmission  
Line**      **Other Transmission Line Expenses Not Listed**

Information not provided.

**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
<b>Existing Tower Description</b>	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Is this tower consider Complex?	Candelabra
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	Unknown
<b>Existing Tower Structure Registration</b>	Do you have a tower registration number?	Yes
	ASR Number	1059733
<b>Coordinates (NAD83 ( North American Datum of 1983))</b>	Latitude (NAD83)	32° 32' 36.0" N-
	Longitude (NAD83)	096° 57' 33.0" W-
	Overall Structure Height	1635.15 feet
	Support Structure Height	1523.60 feet
	Ground Elevation Above Mean Sea Level (AMSL)	813.97 feet



Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	American Towers, LLC
Date Constructed	06/18/2000

**FM, AM or TV radio  
broadcasters. Facility ID's,  
Call Signs and Services of  
other broadcast stations with  
whom the tower is shared**

Facility ID	Call Sign	Service
42359	KTXD-TV	DTV
49324	KERA-TV	DTV
49326	KDTN	DTV
51517	KTXA	DTV
68834	KPXD-TV	DTV
17037	KDFI	DTV
22201	KDAF	DTV
23422	KTVT	DTV

**Primary  
Tower**

**Tower Modification Costs**

Section	Question	Response
<b>Engineering Study</b>	Please what type of engineering study is required, if any:	Study needed for undocumented /poorly documented tower

<b>Tower Reinforcements</b>	Please select whether tower reinforcements are needed:	Minor Reinforcements needed
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**Primary Tower**

**Tower Rigging Costs**

Section	Question	Response
<b>Tower Rigging Costs</b>	Complex Tower	Candelabra
<b>Helicopter Services Required</b>	Are helicopter services required?	No

**Primary Tower**

**Other Tower Expenses Not Listed**

Name	Description
<b>Ground</b>	Permit package
<b>Permit</b>	Drawing package
<b>structural</b>	load study

**Outside Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	95
	Explanation	American Tower
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	No
	For Auxiliary Facility	N/A
	For Main Facility	N/A
	Prepare request for Special Temporary Authority	Yes
	Quantity	2
	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	Yes
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	No
	For Auxiliary Facility	N/A
	For Main Facility	N/A

	Prepare request for Special Temporary Authority	Yes
	Quantity	2
	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	No
	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**

Name	Description
rf	system test
site	meeting

**Other Expenses**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<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	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	No
	FCC Special Temporary Authority Application	No
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	No
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	No
	Does this relocation require MVPD Notification of a Channel Change?	No

**Other  
Expenses**

**Other Expenses Not Listed**

Name	Description
Rental	Tower rental

**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>Primary Transmitter HPTV PRLX U32</b>	<b>\$1,976,500.00</b>	<b>\$1,578,750.00</b>		<b>\$0.00</b>	
2" Rigid Conduit and Wiring (Cost per foot)	\$13,000.00	\$6,250.00	N/A	N/A	N/A
Other Electrical Service: disconnects, labor, panels	<i>\$85,000.00</i>	\$85,000.00	quoted	N/A	N/A
10 Ton system	\$60,500.00	\$57,500.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 52 - 61 kW	\$1,788,000.00	\$1,400,000.00	N/A	N/A	N/A
Other -- Building Addition Size: 1000.0	<i>\$30,000.00</i>	\$30,000.00	American Tower	N/A	N/A
<b>Sub-total</b>	<b>\$1,976,500.00</b>	<b>\$1,578,750.00</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$4,332,898.00</b>	<b>\$2,162,589.00</b>	N/A	<b>\$0.00</b>	N/A

**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>Primary Antenna TFU-C4-AP-14/48H-2-R-T</b>	<b>\$240,073.00</b>	<b>\$190,593.00</b>		<b>\$0.00</b>	
UHF - Lower Power, Top Mount, Class A, broadband panel, 48 bay,, 1000 kW input, directional,, elliptically or circularly polarized	<i>\$122,693.00</i>	\$122,693.00	American Tower	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$2,500.00	N/A	N/A	N/A
Elbow complex, broadband, at antenna input, per 8 3/16. feedline (if needed)	\$18,950.00	\$5,400.00	N/A	N/A	N/A
Adding a module to existing combiner (without antenna)	\$84,200.00	\$52,500.00	N/A	N/A	N/A
COMBINER	<i>\$7,500.00</i>	\$7,500.00	installation	N/A	N/A
<b>Sub-total</b>	<b>\$240,073.00</b>	<b>\$190,593.00</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$4,332,898.00</b>	<b>\$2,162,589.00</b>	N/A	<b>\$0.00</b>	N/A

**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>\$1,356,600.00</b>	<b>\$107,616.00</b>		<b>\$0.00</b>	
Rigid Transmission Line - copper, 8 3/16" broadband	\$1,356,600.00	\$107,616.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$1,356,600.00</b>	<b>\$107,616.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$4,332,898.00</b>	<b>\$2,162,589.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>

**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 GTOWER</b>	<b>\$618,610.00</b>	<b>\$158,270.00</b>		<b>\$0.00</b>	
Complex Tower (includes, for example, those with candelabras and /or stacked antennas)	\$421,000.00	\$105,000.00	N/A	N/A	N/A
Ground	<i>\$4,700.00</i>	\$4,700.00	N/A	N/A	N/A
Permit	<i>\$4,700.00</i>	\$4,700.00	N/A	N/A	N/A
structural	<i>\$3,910.00</i>	\$3,910.00	N/A	N/A	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$4,960.00	N/A	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$35,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$618,610.00</b>	<b>\$158,270.00</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$4,332,898.00</b>	<b>\$2,162,589.00</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>\$58,715.00</b>	<b>\$48,480.00</b>		<b>\$0.00</b>	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Project management of the transition	\$15,010.00	\$9,480.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$4,100.00	\$3,000.00	N/A	N/A	N/A

Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$5,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$7,360.00	\$7,000.00	N/A	N/A	N/A
rf	<i>\$5,000.00</i>	\$5,000.00	American Tower	N/A	N/A
site	<i>\$2,000.00</i>	\$2,000.00	American Tower	N/A	N/A
<b>Sub-total</b>	\$58,715.00	\$48,480.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$4,332,898.00	\$2,162,589.00	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>\$82,400.00</b>	<b>\$78,880.00</b>		<b>\$0.00</b>	
Non-zoning permits	<i>\$750.00</i>	\$750.00	American Tower	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$12,500.00</i>	\$12,500.00	American Tower	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$8,030.00	N/A	N/A	N/A
Rental	<i>\$57,600.00</i>	\$57,600.00	American Tower	N/A	N/A
<b>Sub-total</b>	<b>\$82,400.00</b>	<b>\$78,880.00</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$4,332,898.00</b>	<b>\$2,162,589.00</b>	N/A	<b>\$0.00</b>	N/A

**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>	\$4,332,898.00	\$2,162,589.00	\$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
	<p><b>Submission of Estimated Expenses Statements</b></p>	<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 data-bbox="758 772 1061 1176">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 data-bbox="758 1198 1045 1444">2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li data-bbox="758 1467 1061 1758">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.

**John B. Casoria ,  
Esq. .**  
*Assistant  
Secretary*

07/10/2017

## Attachments