

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

| Facility ID: | 71357 | Service: DTV | Call Sign: | WDSU | Channel: 19 (UHF) |
|-----------------|----------|---------------------|---------------|------|-------------------|
| File | 00000 | 26830 | | | |
| Number: | | | | | |
| FRN: 00 | 01769256 | Date | 02/19 | | |
| | | Submitted: | /2018 | | |

Applicant Name, Type, and Contact Information

Information

| Applicant | Address | Phone | Email | Applicant Type |
|---|--|-----------------------------|----------------------------|-------------------|
| NEW ORLEANS HEARST TELEVISION INC. Doing Business As: NEW ORLEANS HEARST TELEVISION INC. | P.O. BOX 1800 RALEIGH, NC 27602 United States | +1 (919) 839- 0300 | mprak@brookspierce. com | Corporation |

Reimbursement Contact Name and Information Reimbursement Contact Information

| Applicant | Address | Phone | Email |
|----------------|---------|-------|-------|
| [Confidential] | | | |

| Preparer Contact Information | Preparer Contact Name and Information | ntact Name and Information | | | | |
|------------------------------------|--|----------------------------|-------|-------|--|--|
| | Applicant | Address | Phone | Email | | |
| internation | The Preparer is same as the reimbursement contact. | | | | | |

| Broadcaster | Question | Response |
|-------------|----------|----------|
| Information | | |
| and | | |
| Transition | | |
| Plan | | |

| 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. | Yes |
|--|---------------------------------------|
| Briefly describe transition plan | see attached transition plan document |

| Transmitters | Section | Question | Response |
|--------------|---------------------------------|---|----------|
| | Transmitter Related Expenses | Do you have transmitter related expenses? | Yes |

| Primary | Existing Transmitter Information | | | | |
|-------------|---|--|--------------------------|--|--|
| Transmitter | Section | Question | Response | | |
| | Existing Transmitter Description | 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 | | |
| | Existing Transmitter Manufacturer and Type | Manufacturer | | | |
| | | Model | Sigma CD3260P2 | | |
| | | Year | 2008 | | |
| | | Туре | Inductive Output Tube | | |
| | | IOT Power Type | Тwo | | |
| | | Power Capacity | 60 kW | | |

Existing Transmitter Information

| Primary | New Transmitter Costs | | | | | |
|-------------|-----------------------|---|---|--|--|--|
| Transmitter | Section | Question | Response | | | |
| | New Transmitter | Use | Primary (Main) | | | |
| | | Change Type | Purchase New | | | |
| | | Is this a request for upgraded equipment? | Yes | | | |
| | | Manufacturer | | | | |
| | | Model | ULXTE-40 | | | |
| | | Transmitter Type | Solid State | | | |
| | | Solid State Cooling | Liquid Cooled | | | |
| | | Solid State Power capacity | 25.3 kW | | | |
| | | Justification for New Transmitter | Existing IOT transmitter cannot be converted to post- transition channel, see GatesAir EOL and HTV IOT to Solid-State Justification statements. An IOT replacement is more expensive than proposed SS transmitter. See attached Comark IOT Transmitter quote. | | | |

| Primary | Other Transmitter Costs | | | | |
|-------------|---|--|--|--|--|
| Transmitter | Section | Question | Response | | |
| | Electrical Service | Service Entrance (3 phases 800A 208V) | No | | |
| | | Switchgear (industrial 800 amp) | No | | |
| | | Transformer (480V) | No | | |
| | | Power | N/A | | |
| | | Rigid Conduit and Wiring | No | | |
| | | Size | N/A | | |
| | | Length | N/A | | |
| | | Other Electrical Service | Yes | | |
| | | Description | see attached quote for transmitter electrical service | | |
| | HVAC Service | Does the replacement transmitter require HVAC Service? | No | | |
| | | Туре | N/A | | |
| | | Size | N/A | | |
| | | Other Size | N/A | | |
| | Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leashold improvement? | No | | |
| | | Size | N/A | | |
| | Channel 14 Costs | 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 | | | |
|------------------------|-----------------------------------|---|--|--|
| | Name | Description | | |
| | RF Accessories | Additional RF components required for transmitter operation | | |
| | Electrical Accessories | Manufacturer required surge protection & voltage conversion | | |
| | Shipping | transmitter shipping | | |
| | Sales Tax | transmitter sales tax | | |

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

Existing Antenna Information

Primary

| Antenna | Section | Question | Response |
|---------|---|--|--------------------|
| | Existing Antenna Description | Type of change | Retune Existing |
| | | Antenna Use | Primary (Main) |
| | | Description of Use | N/A |
| | | Ownership | Owned |
| | | Owner | N/A |
| | | 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 |
| | Existing Antenna Manufacturer and Type | Class | Full Power |
| | | Mounting | Top Mount |
| | | Antenna position in stack | Not in Stack |
| | | Polarization | Horizontal |
| | | Туре | Broadband Panel |
| | | Number of Stations Supported | 3 |
| | | Number of Panels | 23 |
| | | Design power capacity in use | 66.0 % |
| | | Lower Limit | 470.00 MHz |

| Upper Limit | 698.00 MHz |
|---------------------------------|---------------------|
| Other Antenna Type | N/A |
| ERP: (Effective Radiated Power) | 1000.0 kW |
| Manufacturer | Dielectric |
| Model | TUF-C4SP- 10/32U |
| Year | 2008 |

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

| Facility ID | Call Sign |
|-------------|-----------|
| 54280 | WNOL-TV |
| 72119 | WGNO |

| Primary | Adjustment to E | kisting Antenna |
|---------|-----------------|-----------------|
| Antenna | Section | Question |

| enna | Section | Question | Response |
|------|-----------------------------------|---|----------|
| | Sweep Test of Existing Antenna | Do you need a sweep test of existing antenna? | Yes |

Primary Other Antenna Costs

| | IIIIC | uу |
|---|-------|-----|
| A | nter | nna |

| Section | Question | |
|--------------------------------|--|------------|
| Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | Yes |
| | Туре | New |
| | Number of channels supported | 3 |
| | Frequencies of channels supported | RF channel |
| | Frequency | N/A |

Enter a list of RF channel numbers.

RF Channel Number 26 15 19

PrimaryOther Antenna Cost Not ListedAntennaInformation not provided.

Auxiliary Existing Antenna Information

Antenna Section Question Response **Existing Antenna** Type of change Retune Description Existing Antenna Use Auxiliary (Backup) Description of Use backup to main antenna Ownership Owned N/A Owner Site N/A Is the existing antenna shared with another Yes station or stations? Is the existing antenna directional? Yes Is antenna in operating condition? Yes Is antenna located on or in close proximity No to an antenna farm? **Existing Antenna** Class Full Power Manufacturer and Type Mounting Side Mount Antenna position in stack Not in Stack

| Polarization | Horizontal |
|---------------------------------|--------------------------|
| Туре | Other |
| Number of Stations Supported | N/A |
| Number of Panels | N/A |
| Design power capacity in use | N/A |
| Lower Limit | N/A |
| Upper Limit | N/A |
| Other Antenna Type | broadband slot cavity |
| ERP: (Effective Radiated Power) | 780.0 kW |
| Manufacturer | RFS |
| Model | RD32A-HP |
| Year | 2008 |

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

| Facility ID | Call Sign |
|-------------|-----------|
| 54280 | WNOL-TV |
| 72119 | WGNO |

Auxiliary Adjustment to Existing Antenna

| Antenna | Section | Question | Response |
|---------|-----------------------------------|---|----------|
| | Sweep Test of Existing Antenna | Do you need a sweep test of existing antenna? | Yes |

| Auxiliary | Other Antenna Costs | | |
|-----------|--------------------------------|--|----------|
| Antenna | Section | Question | Response |
| | Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | No |

| Туре | |
|-----------------------------------|-----|
| Number of channels supported | N/A |
| Frequencies of channels supported | N/A |
| Frequency | |

Auxiliary Other Antenna Cost Not Listed

Antenna Information not provided.

| Transmission ^{Seffien} | Question | Response |
|---------------------------------------|---|----------|
| Transmission Line Related Expenses | Do you have transmission line related expenses? | No |

| Tower | Section | Question | Response |
|--------------------------------------|---|---|----------|
| Equipment And Rigging Costs | Tower Equipment or Rigging Costs Changes | Do you have tower equipment or rigging costs changes? | No |

| Outside | Section | Question | Response |
|--------------|--|--|--|
| Professional | I Services Costs Outside Project Management Services | Do you require outside project management services? | Yes |
| | | Number of Hours | 200 |
| | | Explanation | Need outside RF experience to assist with transition planning and execution. |
| | Outside RF consulting Engineering Services | 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 | Yes |
| | | For Auxiliary Facility | Yes |
| | | For Main Facility | Yes |
| | | Prepare request for Special Temporary Authority | Yes |

| | Quantity | 1 |
|--|--|-----|
| | Do you have Distributed Transmission System engineering services? | N/A |
| | Critical Facility | N/A |
| | Terrain-Shielded Facility | N/A |
| Attorney and Other Outside Consulting | Prepare and file Form FCC Construction Permit Application | Yes |
| Services | For Auxiliary Facility | Yes |
| | For Main Facility | Yes |
| | Prepare and file Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | Yes |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary Authority | Yes |
| | Quantity | 1 |
| | 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 |
| RF Field Engineering Services | 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 Other Professional Services Expenses Not Listed

| Professional | Services Costs | Description |
|--------------|-------------------------|---|
| | Transmitter Site Survey | Transmitter planning survey & transmitter building drawings |

| Other | Section | Question | Response |
|-------------------|---------------------------------|--|----------|
| Other Expenses | AM Pattern Disturbance | Is an Impact Study needed? | No |
| | | Is Remediation needed? | No |
| | Facility Expenses | 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 |
| | Permit and Filing Costs | 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 | No |
| | Other Miscellaneous Expenses | 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? | No |
| | | Does this relocation require Equipment Storage? | No |
| | | 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 Not Listed

Expenses Information not provided.

Transmitters

Cost Information

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 |
|---|--------------------------------|-------------------|---|--------------|------------------------------|
| Primary Transmitter ULXTE-40 | \$1,216,549.00 | \$1,117,432.00 | | \$320,560.82 | |
| Sales Tax | \$104,853.00 | \$104,853.00 | transmitter sales tax per attached GatesAir quote | N/A | N/A |
| Shipping | \$11,000.00 | \$11,000.00 | See GatesAir quote | N/A | N/A |
| RF Accessories | \$90,305.00 | \$90,305.00 | RF components required for transmitter and connection /switching to combiner and antenna systems | N/A | N/A |
| Other Electrical Service: see attached quote for transmitter electrical service | \$55,579.00 | \$55,579.00 | Electrical service to install replacement transmitter. Quote attached. | N/A | N/A |
| UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW | \$947,000.00 | \$847,883.00 | GatesAir quote sections A, B & E. This is the transmitter, mask filter, | \$320,560.82 | N/A |

| | | | installation and proof per the FCC "transmitter" definition. | | |
|-----------------------------|----------------|----------------|---|--------------|-----|
| Electrical Accessories | \$7,812.00 | \$7,812.00 | Required transmitter electrical components. See GatesAir quote. | N/A | N/A |
| Sub-total | \$1,216,549.00 | \$1,117,432.00 | N/A | \$320,560.82 | N/A |
| Total for all systems | \$1,422,509.00 | \$1,305,633.00 | N/A | \$344,185.82 | N/A |

Components

| Actual Information Description | File Name | |
|---|-----------------------------------|--|
| Sales Tax | Information not provided. | |
| Shipping | Information not provided. | |
| RF Accessories | Information not provided. | |
| Other Electrical Service: see attached quote for transmitter electrical service | Information not provided. | |
| UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW | Component Description: Amount: | Transmitter 1st deposit \$105,296.63 |
| | Component Description: Amount: | Transmitter 2nd deposit \$215,264.19 |
| Electrical Accessories | Information not provided. | |

Antennas

Cost Information

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 |
|--|--------------------------------|-------------------|--|-------------|------------------------------|
| Primary Antenna TUF-C4SP- 10/32U | \$90,930.00 | \$85,556.00 | | \$0.00 | |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
| UHF - High Power Top Mount Three Station broadband panel antenna horizontally polarized | \$0.00 | \$0.00 | No cost | N/A | N/A |
| New combiner, cost per channel (without antenna) | \$84,200.00 | \$79,156.00 | Combiner and installation from GatesAir quote. This is the total cost of the 3 channel combiner, not the per channel cost. I don't see a provision in this form to multiply this figure by the number of channels. | N/A | N/A |

| Auxiliary Antenna RD32A-HP | \$6,730.00 | \$6,400.00 | | \$0.00 | |
|--|----------------|----------------|---------|--------------|-----|
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
| UHF - High Power, Side Mount, basic slot antenna, 780 kW input, directional,, horizontally polarized | \$0.00 | \$0.00 | No cost | N/A | N/A |
| Sub-total | \$97,660.00 | \$91,956.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,422,509.00 | \$1,305,633.00 | N/A | \$344,185.82 | N/A |

Components

Information not provided.

Cost Transmission Line

Information Information not provided.

Cost Tower Equipment and Rigging Costs

Information Information not provided.

Outside Professional Services

Cost Information

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 |
|--|--------------------------------|-------------------|------------------------------------|-------------|------------------------------|
| Outside Professional Services | \$90,805.00 | \$79,350.00 | | \$23,625.00 | |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | \$3,680.00 | \$3,500.00 | N/A | N/A | N/A |
| Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application | \$4,210.00 | \$4,000.00 | 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 |
| Prepare request for Special | \$2,050.00 | \$1,500.00 | N/A | N/A | N/A |

| Temporary Authorization | | | | | |
|--|-------------|-------------|-----|------------|----|
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | N/A | N |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | N/A | N/ |
| Project management of the transition | \$31,600.00 | \$22,500.00 | N/A | N/A | N/ |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | N/A | N/ |
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$2,500.00 | N/A | N/A | N/ |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$1,150.00 | N/ |
| Prepare engineering section of FCC | \$3,155.00 | \$3,000.00 | N/A | \$1,875.00 | N/ |

| Form 2100 (main), Construction Permit Application | | | | | |
|---|----------------|----------------|--|--------------|-----|
| Transmitter Site Survey | \$20,600.00 | \$20,600.00 | Transmitter planning survey & transmitter building drawings. Quote attached | \$20,600.00 | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application | \$2,365.00 | \$2,250.00 | 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 |
| Sub-total | \$90,805.00 | \$79,350.00 | N/A | \$23,625.00 | N/A |
| Total for all systems | \$1,422,509.00 | \$1,305,633.00 | N/A | \$344,185.82 | N/A |

Components

| Actual Information Description | File Name |
|--|---------------------------|
| Attorney Fees - Prepare and File request for Special Temporary Authorization | Information not provided. |
| Attorney Fees - Aux Antenna, prepare and File | Information not provided. |

| Form 2100 Construction Permit or License Application | | |
|--|-----------------------------------|---|
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | Information not provided. | |
| Prepare request for Special Temporary Authorization | Information not provided. | |
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application | Information not provided. | |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. | |
| Project management of the transition | Information not provided. | |
| Prepare and or review reimbursement form | Information not provided. | |
| Address transition timing and coordination issues w/ other stations and wireless | Information not provided. | |
| Perform engineering study for new channel assignment and antenna development | Component Description: Amount: | engineering stud for new channel assignment \$1,150.00 |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Component Description: | Prepare engineering section of FCC Form 2100, Construction Permit Applicatio \$1,875.00 |
| Transmitter Site Survey | | |

| | Component Description: | WDSU Field |
|---|-------------------------------|------------------|
| | | Service GatesAir |
| | | 6-30-2016, |
| | | \$20,600 |
| | Amount: | \$20,600.00 |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Information not provided. | |
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction | Information not provided. | |
| Permit Application | | |

Other Expenses

Cost Information

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 |
|--|--------------------------------|-------------------|--|--------------|------------------------------|
| Other Expenses | \$17,495.00 | \$16,895.00 | | \$0.00 | |
| MVPD Notification of Channel Change | \$2,500.00 | \$2,500.00 | Legal council assistance in MVPD notification | N/A | N/A |
| Develop and air announcement of upcoming channel change | \$2,000.00 | \$2,000.00 | Attorney fees to ensure compliance with FCC requirement | N/A | N/A |
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$325.00 | N/A | N/A | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | N/A | N/A | N/A |
| FCC Filing Fees - Form 2100 minor change CP application | \$1,110.00 | \$1,070.00 | N/A | N/A | N/A |
| Sub-total | \$17,495.00 | \$16,895.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,422,509.00 | \$1,305,633.00 | N/A | \$344,185.82 | N/A |

Components

Information not provided.

| Cost Information | Grand Total | | | | |
|---------------------|-----------------------|--------------------------------|----------------|--------------|--|
| | | Predetermined Cost Estimate | Estimated Cost | Actual Cost | |
| | Total for all systems | \$1,422,509.00 | \$1,305,633.00 | \$344,185.82 | |

| Reimbursem | entestiatus | Response |
|------------|--|----------|
| | 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 |
|---------------|---|---|----------|
| Certification | Section Submission of Actual Cost Documentation Statements | Question WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (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 AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733). 1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct. 3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 4. The above-named entity acknowledges the submission of the information herein | Kesponse |
| | | | |

creates no obligation on the part of the government to pay any amount.

- 5. 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 (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 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.
- 7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.
- 8. The above-named entity acknowledges that overpayments or payments in error

| must be promptly refunded to the Commission. | |
|--|---|
| 9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite 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. | Douglas Durkee Hearst Television Manager of Spectrum Repack |
| | 02/19/2018 |

Attachments