



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **78908** | Service: **DTV** | Call **WSKA** | Channel: **25 (UHF)** |
ID: | Sign:
File **0000028467**
Number:
FRN: **0003775830** | Date **06/05**
Submitted: **/2018**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|---|---|-----------------------------|----------------------|--------------------|
| WSKG PUBLIC TELECOMMUNICATIONS COUNCIL Doing Business As: WSKG PUBLIC TELECOMMUNICATIONS COUNCIL | Greg Catlin 601 GATES ROAD, SUITE 4 VESTAL, NY 13850 United States | +1 (607) 729- 0100 | gcatlin@wskg. org | 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 |
|---|---|-----------------------|---------------------|
| Eric Adler <i>Broadcast Engineer</i> WSKG PUBLIC TELECOMMUNICATIONS COUNCIL | Eric Adler 601 Gates Rd Ste 4 Vestal, NY 13850 United States | +1 (607) 729- 0100 | eadler@wskg. org |

**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. | Yes |
| Briefly describe transition plan | Install transfer switch between existing combiner output and feed to antenna (with dummy load for testing), install new combiner into transfer switch, install transmitters, test, switch, and tune DigiTline for optimal performance on new channels. |

Transmitters

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

**Primary
Transmitter**

Existing Transmitter Information

| 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 | Ultimate TEU2- 2K50LV |
| | Year | 2003 |
| | Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power Capacity | 2.5 kW |

**Primary
Transmitter**

New Transmitter Costs

| Section | Question | Response |
|-----------------|---|--|
| New Transmitter | Use | Primary (Main) |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | No |
| | Manufacturer | |
| | Model | ULXTE-6 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power capacity | 6 kW |
| | Justification for New Transmitter | Widelity shows lowest power level for liquid cooled as 4.9-6.5kW. The 6kW ULXTE-6 is the lowest power GatesAir liquid cooled transmitter in this range. Building cooling system is not sufficient for an air-cooled transmitter. |

**Primary
Transmitter**

Other Transmitter Costs

| 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 | Yes |
| | Size | 2 inches |
| | Length | 60.0 feet |
| | Other Electrical Service | Yes |
| | Description | 208v 3ph step-down transformer, 30kVA, plus 110v equipment feeds and switchgear |
| HVAC Service | Does the replacement transmitter require HVAC Service? | No |
| | Type | 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 leasehold 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 |
|---------------|--|
| ATSC Analyzer | Device to test and ensure complex multiple transmitter system compliance with FCC rules and regulations. |

Antennas

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

**Primary
Antenna****Existing Antenna Information**

| 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? | Yes |
| Existing Antenna Manufacturer and Type | Class | Full Power |
| | Mounting | Top Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | Type | Broadband Panel |
| | Number of Stations Supported | 3 |
| | Number of Panels | 28 |
| | Design power capacity in use | 31.5 % |
| | Lower Limit | 566.00 MHz |

| | |
|--|------------------------|
| Upper Limit | 722.00 MHz |
| Other Antenna Type | N/A |
| ERP: (Effective Radiated Power) | 25.0 kW |
| Manufacturer | Dielectric |
| Model | TUA-C4SP- 8/28M-1-T |
| Year | 2003 |

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

| Facility ID | Call Sign |
|-------------|-----------|
| 62219 | WYDC |
| 71508 | WENY-TV |

**Primary
Antenna**

Adjustment to Existing Antenna

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

**Primary
Antenna**

Other Antenna Costs

| Section | Question | Response |
|------------------------------------|--|------------|
| Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | Yes |
| | Type | 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 |
|-------------------|
| 35 |
| 25 |
| 30 |

Primary
Antenna

Other Antenna Cost Not Listed

| Name | Description |
|--------------------------------|--|
| Transfer switch and Dummy Load | Switch and load to facilitate testing of new transmission system and changeover from old combiner to new combiner. |

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 |
|--|--|------------------|
| Existing Transmission Line Description | 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? | Yes |
| | Is Transmission Line in operating condition? | Yes |
| Existing Transmission Line Manufacturer and Type | Manufacturer | Dielectric |
| | Type | Rigid |
| | Diameter | 3 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | Broadband |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 795 feet per run |

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

| Facility ID | Call Sign |
|-------------|-----------|
| 62219 | WYDC |
| 71508 | WENY-TV |

Primary

Other Transmission Line Expenses Not Listed

Transmission Line

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? | No |

**Outside
Professional Services Costs**

| Section | Question | Response |
|--|--|---|
| Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 180 |
| | Explanation | Outside consultant has 5 years experience at this facility and 38 years maintaining transmission systems and managing related projects. Staff is limited and contains new staff in key positions. |
| 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 | No |
| | For Main Facility | Yes |
| | Prepare engineering section of Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary | No |

| | | |
|---|--|-----|
| | Authority | |
| | Quantity | N/A |
| | Do you have Distributed Transmission System engineering services? | N/A |
| | Critical Facility | N/A |
| | Terrain-Shielded Facility | N/A |
| Attorney and Other Outside Consulting Services | 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 | No |
| | Quantity | N/A |
| | 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 | Yes |
| | Number of Days | 3 |
| | Justification | Proof of performance, RF exposure level calculations and instalation /proof of combiner performance. |

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

| Name | Description |
|---------------------------|---|
| NETA Financial Management | Support provided to facilitate reimbursement. NETA is currently handling WSKG-TV and WSKA's accounting and bookkeeping services. This is an additional service. |

Other Expenses

| Section | Question | Response |
|-------------------------------------|--|----------|
| 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 | No |
| | FCC License to Cover Application | No |
| | 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)? | Yes |
| | 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**

Other Expenses Not Listed

| Name | Description |
|-----------------------------------|--|
| Additional Legal Expenses | Additional legal expenses for small market public TV station |
| Quarterly Progress Reports | Assist with and prepare FCC-required reports |
| Site Survey | Site survey by transmitter manufacturer to predetermine precise measurements and ensure a smooth installation. |

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 |
|---|-----------------------------|---------------------|--|-------------------|---------------------------|
| Primary Transmitter ULXTE-6 | \$283,410.00 | \$269,850.00 | | \$0.00 | |
| ATSC Analyzer | <i>\$0.00</i> | \$0.00 | N/A | \$0.00 | N/A |
| Other Electrical Service: 208v 3ph step-down transformer, 30kVA, plus 110v equipment feeds and switchgear | <i>\$8,350.00</i> | \$8,350.00 | Quote attached as Panko Electric Quote. This site will require a disconnect feeding the transformer and a panel after the transformer. | N/A | N/A |
| 2" Rigid Conduit and Wiring (Cost per foot) | \$1,560.00 | \$1,500.00 | Predetermined cost based on 60' of 2" rigid with wiring. | N/A | N/A |
| UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW | \$273,500.00 | \$260,000.00 | Predetermined Widelity cost estimate for 4.9-6.5kW transmitter. Widelity does not list costs for smaller sized transmitters. | \$0.00 | N/A |
| Sub-total | \$283,410.00 | \$269,850.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$568,640.00 | \$702,830.00 | N/A | \$3,325.50 | 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 |
|---|-----------------------------|---------------------|---|-------------------|---------------------------|
| Primary Antenna TUA-C4SP-8/28M-1-T | \$108,011.00 | \$263,481.00 | | \$0.00 | |
| Transfer switch and Dummy Load | <i>\$17,081.00</i> | \$17,081.00 | Quote from Dielectric, attached as Dielectric Transfer Switch | N/A | N/A |
| New combiner, cost per channel (without antenna) | \$84,200.00 | \$240,000.00 | Widely cost-per-channel, times three channels, as WSKG PUBLIC TELECOMMUNICATIONS COUNCIL owns the entire combiner and will bear 100% of the cost with WYDC-TV and WENY bearing 0% each. | N/A | N/A |
| UHF - High Power Top Mount Three Station broadband panel antenna horizontally polarized | <i>\$0.00</i> | \$0.00 | Existing antenna will remain in service. | N/A | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | predetermined cost | N/A | N/A |
| Sub-total | \$108,011.00 | \$263,481.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$568,640.00 | \$702,830.00 | N/A | \$3,325.50 | 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 |
|---------------------------------|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Primary Transmission Line | \$0.00 | \$0.00 | | \$0.00 | |
| Sub-total | \$0.00 | \$0.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$568,640.00 | \$702,830.00 | N/A | \$3,325.50 | N/A |

Components

Information not provided.

Cost Information

Tower Equipment and Rigging Costs

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 |
|--|-----------------------------|----------------|--|-------------|---------------------------|
| Outside Professional Services | \$63,420.00 | \$56,250.00 | | \$2,693.50 | |
| NETA Financial Management | \$2,500.00 | \$2,500.00 | Half of attached quotation is for WSKG-TV the other half is for WSKA | \$1,250.00 | N/A |
| Additional Field Engineering Service, 3 Days | \$7,500.00 | \$7,500.00 | Attach price schedule. From MSW | N/A | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application | \$2,365.00 | \$2,250.00 | Predetermined. | N/A | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$5,000.00 | Predetermined. | \$893.50 | N/A |
| Prepare engineering section of FCC Form 2100 (main), | \$1,580.00 | \$1,500.00 | Predetermined. | N/A | N/A |

License to
Cover
Application

| | | | | | |
|--|--------------|--------------|-----------------------------|------------|-----|
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | Predetermined. | N/A | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | Predetermined cost estimate | N/A | N/A |
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$2,500.00 | Predetermined cost estimate | N/A | N/A |
| Project management of the transition | \$28,440.00 | \$22,500.00 | Predetermined cost estimate | \$550.00 | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | Predetermined cost estimate | N/A | N/A |
| Sub-total | \$63,420.00 | \$56,250.00 | N/A | \$2,693.50 | N/A |
| Total for all systems | \$568,640.00 | \$702,830.00 | N/A | \$3,325.50 | N/A |

Components

| Actual Information | |
|---------------------------|-----------|
| Description | File Name |
| NETA Financial Management | |

| | |
|--|---|
| | <p>Component Description: WSKA NETA staff support for work related to FCC Spectrum Repack</p> <p>Amount: \$1,250.00</p> |
| | <p>Component Description: NETA staff support for works related to FCC Spectrum Auction</p> <p>Amount: \$1,250.00</p> |
| Additional Field Engineering Service, 3 Days | Information not provided. |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | <p>Component Description: Attorney fees for construction permit application</p> <p>Amount: \$893.50</p> |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Information not provided. |
| Perform engineering study for new channel assignment and antenna development | Information not provided. |
| Address transition timing and coordination issues w/ other stations and wireless | Information not provided. |
| Project management of the transition | |

| | | |
|--|---|--|
| | Component Description: Amount: | Dave Fulton project management services for August 2017 \$300.00 |
| | Component Description: Amount: | Project management of the transition for August 2017 \$300.00 |
| | Component Description: Amount: | Dave Fulton project management services for September 2017 \$250.00 |
| | Component Description: Amount: | Project management of transition for September 2017 \$250.00 |
| Prepare and or review reimbursement form | 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 Justification |
|--|-----------------------------|---------------------|---|-----------------|----------------------|
| Other Expenses | \$113,799.00 | \$113,249.00 | | \$632.00 | |
| Quarterly Progress Reports | <i>\$5,000.00</i> | \$5,000.00 | Assist with and prepare FCC-required quarterly progress reports for station. | \$269.00 | N/A |
| Site Survey | <i>\$17,232.00</i> | \$17,232.00 | Quotation by GatesAir attached as WSKA Site Survey | N/A | N/A |
| Additional Legal Expenses | <i>\$10,000.00</i> | \$10,000.00 | Additional legal expenses necessary to advise and assist small market public TV station with repack requirements. | \$363.00 | N/A |
| MVPD Notification of Channel Change | <i>\$11,000.00</i> | \$11,000.00 | Study of existing cable channel coverage and notification to MVPDs of channel change. Scope is presumed similar to Medical Facility notification, estimated cost matches Widelity cost for Medical Facility notification. | N/A | N/A |
| Develop and air announcement of upcoming channel change | <i>\$1,500.00</i> | \$1,500.00 | Cost of producing a 1 minute spot and producing a informational crawl. | \$0.00 | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$57,517.00</i> | \$57,517.00 | Removal and disposal of existing combiner system and transmitter post-transition. Quotations attached as WSKA Combiner | N/A | N/A |

Removal and WSKA De
Install Dig Tx.
\$16787+\$40730=\$57517

| | | | | | |
|---|--------------|--------------|--------------------------------|------------|-----|
| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | Predetermined cost estimate | N/A | N/A |
| Sub-total | \$113,799.00 | \$113,249.00 | N/A | \$632.00 | N/A |
| Total for all systems | \$568,640.00 | \$702,830.00 | N/A | \$3,325.50 | N/A |

Components

| Actual Information Description | File Name |
|-----------------------------------|---|
| Quarterly Progress Reports | <p>Component Description: Attorney fees for quarterly progress report due 4/10/18</p> <p>Amount: \$50.50</p> <p>Component Description: Attorney fees for quarterly progress report</p> <p>Amount: \$168.00</p> <p>Component Description: Attorney fees for quarterly progress report</p> <p>Amount: \$50.50</p> |
| Site Survey | Information not provided. |
| Additional Legal Expenses | <p>Component Description: Attorney fees for additional legal expenses</p> <p>Amount: \$363.00</p> |
| MVPD Notification of | Information not provided. |

| | |
|--|---------------------------|
| Channel Change | |
| Develop and air announcement of upcoming channel change | Information not provided. |
| Disposal Costs (for equipment and other waste, net of any salvage value) | Information not provided. |
| DTV Medical Facility Notification | Information not provided. |

| Cost Information | Grand Total | | |
|-----------------------|-----------------------------|----------------|-------------|
| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
| Total for all systems | \$568,640.00 | \$702,830.00 | \$3,325.50 |

| Reimbursement Status | Question | 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 |
|---------------|--|---|----------|
| | Submission of Actual Cost Documentation Statements | WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS 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 AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733). | |
| | | <ol style="list-style-type: none"> 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 | |

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) .
6. 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

| | |
|--|---|
| <p>must be promptly refunded to the Commission.</p> <p>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.</p> | |
| <p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p> | <p>Kim Pesko <i>Director of Finance</i></p> <p>06/05/2018</p> |

Attachments