

Federal Communications Commission

(REFERENCE COPY - Not for sub-	mission)
FCC Form 399:	
Reimbursement Reg	uest

				•		
Facility	57838	Service: DT	v	Call	WNCT-TV	Channel:
ID:				Sign:		
12 (High	n VHF)	File	0000	0028589		
		Number:				
FRN: 000	9961889	Date		05/24		
		Submitted:		/2018		

Applicant Name, Type, and Contact Information

Information	Applicant	Address	Phone	Email	Applicant Type
	NEXSTAR BROADCASTING, INC.	Elizabeth Ryder 545 E. John Carpenter Freeway Suite 700 Irving, TX 75062 United States	+1 (972) 373-8800	eryder@nexstar. tv	Corporation

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer	reparer Preparer Contact Name and Information			
Contact Information	Applicant	Address	Phone	Email
	Elizabeth Ryder General Counsel NEXSTAR BROADCASTING, INC.	Elizabeth Ryder 545 E. John Carpenter Freeway Suite 700 Irving, TX 75062 United States	+1 (972) 373- 8800	eryder@nexstar. tv

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	Replace transmitter using existing antenna and line. See attached.

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			
	Manufacturer and Type	Model	PTCD10P1		
		Year	2002		
		Туре	Solid State		
		Solid State Cooling	Air Cooled		
		Solid State Power Capacity	3.8 kW		

Existing Transmitter Information

Primary	New Transmitter Costs				
Transmitter	Section New Transmitter	Question	Response		
		Use	Primary (Main)		
		Change Type	Purchase New		
		Is this a request for upgraded equipment?	No		
		Manufacturer			
	-	Model	TBD		
		Transmitter Type	Solid State		
		Solid State Cooling	Air Cooled		
		Solid State Power capacity	4.4 kW		
		Justification for New Transmitter	The manufacturer of the existing transmitter advises that the transmitter cannot be retuned to the assigned channel. See attachment.		

Primary	Other Transmitter Costs				
Transmitter	Section	Question	Response		
	Electrical Service	Service Entrance (3 phases 800A 208V)	No		
		Switchgear (industrial 800 amp)	Yes		
		Transformer (480V)	Yes		
		Power	150 kVA		
		Rigid Conduit and Wiring	Yes		

	Size	3 inches
	Length	100.0 feet
	Other Electrical Service	No
	Description	N/A
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		
	Additional Interior RF System	Interior RF System Existing Transmitter to Interim Transmission line		
	Standby Exciter and Switch	Standby Exciter with Automatic Change Over Switch		

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

Existing Antenna Information

Primary	Existing Antenna Information			
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?	No	
		Is the existing antenna directional?	No	
		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	Bottom	
		Polarization	Horizontal	
		Туре	Slotted Coaxial	
		Number of Stations Supported	N/A	
		Number of Panels	N/A	
		Design power capacity in use	N/A	
		Lower Limit	N/A	

ι	Upper Limit	N/A
(Other Antenna Type	N/A
ļ	ERP: (Effective Radiated Power)	35.0 kW
ſ	Manufacturer	Dielectric
ſ	Model	THA-O4-6H /24HD-1-R
`	Year	2003

Primary Adjustment to Existing Antenna

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

Primary Other Antenna Costs

Antenna

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	

Primary Other Antenna Cost Not Listed

Antenna Information not provided.

Transmissior	n Seffien	Question	Response
	Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

Existing Transmission Line Primary Existing Transmission

missio	n 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
Existing Transmission Line Manufacturer and Type	Is the existing transmission line shared with another station or stations?	No	
	Is Transmission Line in operating condition?	Yes	
	Manufacturer	Dielectric	
	Туре	Rigid	
		Diameter	6 1/8 inches
		Other Diameter	N/A
		Segment Length	Broadband
		Other Segment Length	N/A
		Number of parallel runs	1
		Length	2174 feet per run

Primary	Other Transmission Line Expenses Not Listed		
Transmissio	n Line	Description	
	Sweep Tests	Sweep line to confirm acceptability on	

assigned channel

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

Existing Tower

Primary	Existing Tower			
Tower	Section	Question	Response	
	Existing Tower	Type of change	Modify Existing	
	Description	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?	Yes	
		One or more FM, AM or TV radio broadcaster(s)	Yes	
		Others Types of Users	No	
		Is tower documented for structural analysis?	No	
		Is tower compliant with Rev G?	No	
	Existing Tower	Do you have a tower registration number?	Yes	
	Structure Registration	ASR Number	1006359	
	Coordinates (NAD83 (Latitude (NAD83)	35° 21' 55.9" N-	
	North American Datum of 1983))	Longitude (NAD83)	077° 23' 34.6" W-	
		Overall Structure Height	1984.88 feet	
		Support Structure Height	1856.93 feet	
		Ground Elevation Above Mean Sea Level (AMSL)	25.92 feet	

Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	Tall Towers, Inc.
Date Constructed	02/12/2016

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
54388	WNCT-FM	FM
64609	WERO	FM
594	WITN-TV	DTV

Primary Tower Modification Costs

Tower

Tower

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	No study needed
Tower Reinforcements	Please select whether tower reinforcements are needed:	No reinforcements needed

Primary Tower Rigging Costs

SectionQuestionResponseTower Rigging CostsComplex TowerN/AHelicopter Services
RequiredAre helicopter services required?No

Primary
TowerOther Tower Expenses Not ListedInformation not provided.

Outside	Section	Question	Response
Professional	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	304
		Explanation	Schedule and coordinate multiple vendors, complete progress reports, and update Schedule 399. Station does not have available personnel or personnel or personnel or personnel trained in project management for such complex projects. Internal accounting and Project management.
	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 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	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	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	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	17
Justification	It will be necessary to survey the site, plan the equipment, develop specifications for purchasing, and oversee multiple vendor RF projects. Station does not have available personnel or personnel trained in such services.

Other Professional Services Expenses Not Listed Professional Services rCostsided.

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	Yes
		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?	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 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 TBD	\$265,450.00	\$254,500.00		\$0.00	
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Transformer 3 phase/480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$4,900.00	N/A	N/A	N/A
Additional Interior RF System	\$19,000.00	\$19,000.00	N/A	N/A	N/A
Standby Exciter and Switch	\$25,000.00	\$25,000.00	N/A	N/A	N/A
High VHF - Air Cooled Solid State Transmitter 1.1 . 4.4 kW	\$152,500.00	\$145,000.00	N/A	N/A	N/A
Sub-total	\$265,450.00	\$254,500.00	N/A	\$0.00	N/A
Total for all systems	\$991,362.00	\$782,950.00	N/A	\$26,787.50	N/A

Components

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 THA- O4-6H/24HD- 1-R	\$25,680.00	\$24,400.00		\$0.00	
High VHF - High Power Top Mount One Station horizontally polarized	\$0.00	\$0.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Elbow complex, broadband, at antenna input, per 8 3 /16. feedline (if needed)	\$18,950.00	\$18,000.00	N/A	N/A	N/A
Sub-total	\$25,680.00	\$24,400.00	N/A	\$0.00	N/A
Total for all systems	\$991,362.00	\$782,950.00	N/A	\$26,787.50	N/A

Components

Transmission Line

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 Transmission Line	\$6,400.00	\$6,400.00		\$0.00	
Sweep Tests	\$6,400.00	\$6,400.00	N/A	N/A	N/A
Sub-total	\$6,400.00	\$6,400.00	N/A	\$0.00	N/A
Total for all systems	\$991,362.00	\$782,950.00	N/A	\$26,787.50	N/A

Components

Tower Equipment and Rigging Costs

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 Tower GTOWER	\$210,500.00	\$20,000.00		\$10,000.00	
Tall Tower (greater than 500')	\$210,500.00	\$20,000.00	Rigging to replace elbow complex or tune existing elbow complex	\$10,000.00	N/A
Sub-total	\$210,500.00	\$20,000.00	N/A	\$10,000.00	N/A
Total for all systems	\$991,362.00	\$782,950.00	N/A	\$26,787.50	N/A

Components

Actual Information Description	File Name	
Tall Tower (greater than 500')	Component Description:	Deposit as agreed
		per Nexstar Commitment Letter and Coast
		to Coast Tower Service
	Amount:	\$10,000.00

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	\$116,952.00	\$112,350.00		\$16,787.50	
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 Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Project management of the transition	\$48,032.00	\$45,600.00	N/A	\$16,787.50	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	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	\$7,000.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	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
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	N/A	N/A

FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Additional Field Engineering Service, 17 Days	\$34,000.00	\$34,000.00	N/A	N/A	N/A
Sub-total	\$116,952.00	\$112,350.00	N/A	\$16,787.50	N/A
Total for all systems	\$991,362.00	\$782,950.00	N/A	\$26,787.50	N/A

Components

Actual Information Description	File Name	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Prepare request for Special Temporary Authorization	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Project management of the transition	Component Description: Amount:	Project Management for Structural Analysis and Tower Modifications; services 1/1/18 to 1 /26/18 \$1,650.00

Component Description: Project	
Management for	
Structural Analysis	
and Tower	
Modifications;	
services 10/27/17	
to 12/31/17	
Amount: \$2,137.50	
Component Description: Project	
Management for	
Structural Analysis	
and Tower	
Modifications	
including	
consultant Kessler	
& Gehman;	
services 5/27/17 to	
6/30/17	
Amount: \$12,250.00	
· · · · · · · · · · · · · · · · · · ·	
Component Description: Project	
Management for	
Structural Analysis	
and Tower	
Modifications	
including	
consultants	
Kessler and	
Gehman	
Associates.	
Services from	
January 27, 2018	
through February	
23, 2018.	
Amount: \$750.00	
Prepare and or reviewInformation not provided.reimbursement form	
Address transition timing Information not provided.	
and coordination issues w/	
other stations and wireless	

for new cha	gineering study annel assignment a development	Information not provided.
•		Information not provided.
File FCC F	ees -Prepare and orm 2100 (main), Cover Application	Information not provided.
and File red	ees - Prepare quest for Special Authorization	Information not provided.
ASR modifi FCC Form	cation (prepare 854)	Information not provided.
cost of prep 7460 (Notic	Itant, including paring FAA Form are of Proposed on), if needed for pase	Information not provided.
Additional F Service, 17	Field Engineering Days	Information not provided.

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	\$117,050.00	\$116,500.00		\$0.00	
MVPD Notification of Channel Change	\$2,000.00	\$2,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$3,500.00	\$3,500.00	N/A	N/A	N/A
Equipment Storage	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Non-zoning permits	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$25,000.00	\$25,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Sub-total	\$117,050.00	\$116,500.00	N/A	\$0.00	N/A
Total for all systems	\$991,362.00	\$782,950.00	N/A	\$26,787.50	N/A

Components

Cost	Grand Total				
Information		Predetermined Cost Estimate	Estimated Cost	Actual Cost	
	Total for all systems	\$991,362.00	\$782,950.00	\$26,787.50	

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
	Submission of Estimated Expenses Statements	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.	
		 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. The above-named 	
		entity acknowledges that all certifications and attached documentation are considered material representations.	
		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.	

- 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).
- 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.	Elizabeth Ryder General Counsel 05/24/2018

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 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).	
		 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).
- 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.

	The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission. 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.	
an au name	are, under penalty of perjury, that I a thorized representative of the above d applicant for the Authorization(s) ied above.	
		05/24/2018

Attachments