



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **50182** | Service: **DTV** | Call **KAUT-TV** | Channel: **19 (UHF)**
ID:
File **0000028244**
Number:
FRN: **0022824668** | Date **09/24**
Submitted: **/2018**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
TRIBUNE BROADCASTING OKLAHOMA CITY LICENSE, LLC Doing Business As: TRIBUNE BROADCASTING OKLAHOMA CITY LICENSE,LLC	Nick Thompson 444 EAST BRITTON ROAD OKLAHOMA, OK 73114 United States	+1 (405) 478-6290	nick.thompson@kfor.com	Limited Liability Company

Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Name and Information

Applicant	Address	Phone	Email
Bill Vanduyndhoven , Vanduyndhov . <i>Director of Engineering operations Tribune Broadcasting</i>	Bill Vanduyndhoven 2211 Rabbit Hill Cir Dacula, GA 30019 United States	+1 (404) 312-8693	BillV@Tribunemedia.com

**Broadcaster
Information
and
Transition
Plan**

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	Yes
Briefly describe transition plan	Move KAUT to a an existing Tribune owned site and install a Broadband antenna. Site requires renovation to support the operation. KOPX also repacked will be a tenant on the new antenna.

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	Sigma CD P3
	Year	2006
	Type	Inductive Output Tube
	IOT Power Type	Three
	Power Capacity	90 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?	Yes
	Manufacturer	
	Model	ULXTE-60
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	38 kW
	Justification for New Transmitter	Current transmitter has be stated by Manufacturer as not re-tunable. KAUT is moving to another tower and will install replacement transmitter at new site.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	Yes
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	300 kVA

	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	Yes
	Description	New electrical distribution
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Type	Heating and Cooling
	Size	30 tons
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold improvement?	Yes
	Size	2000.0 square feet
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
Ice protection	Ice shield over critical equipment
Removal Disposal	Clear Suite at current site
Asbestos abatement	Clean building and make safe for new system

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	Purchase New
	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	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	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	N/A
	ERP: (Effective Radiated Power)	1000.0 kW

Manufacturer	
Model	TFU-30DSC-R03
Year	2006

Primary
Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	Yes
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Broadband Panel
	Number of Stations Supported	2
	Number of Panels/Bays	25
	Lower Limit	490.00 MHz
	Upper Limit	590.00 MHz
	Design power capacity in use	60.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	2000.0 kW
	Manufacturer	

Model	TUM25-04-16/64H-2-R-T
Year	2018
Justification for New Antenna	Current antenna will not work on assigned channel. Moving to different site

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	2
	Frequencies of channels supported	RF channel
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	No
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Broadband
	Feed Line Size	8 3/16 inches inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No

Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes
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Enter a list of RF channel numbers.

RF Channel Number
18
19

Primary
Antenna

Other Antenna Cost Not Listed

Name	Description
KAUT Combiner install	Install of KAUT 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	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	Rigid
	Diameter	7 3/16 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1600 feet per run

Primary
Transmission Line

New Transmission Line

Section	Question	Response
New Transmission Line Costs	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	1
	Length	1900 feet per run
	Justification for New Transmission Line	Moving to different site. Current line would not support power required

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

Add Tower

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	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 Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1043710
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	35° 34' 07.0" N-
	Longitude (NAD83)	097° 29' 21.0" W-
	Overall Structure Height	1602.01 feet
	Support Structure Height	1508.84 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1146.97 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	Local TV Oklahoma, LLC
	Date Constructed	04/06/1965

**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
69175	KROU	FM

Primary Tower

Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for undocumented /poorly documented tower
Tower Reinforcements	Please select whether tower reinforcements are needed:	Serious Reinforcements needed

Primary Tower

Tower Rigging Costs

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

Primary Tower	Other Tower Expenses Not Listed
	Information not provided.

Primary Tower

Existing Tower

Section	Question	Response
Existing Tower Description	Type of change	Move Equipment
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	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
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1045226
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	35° 35' 52.1" N-
	Longitude (NAD83)	097° 29' 23.2" W-
	Overall Structure Height	1646.96 feet
	Support Structure Height	1549.85 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1102.02 feet
	Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
	Tower Owner	American Towers, LLC.

	Date Constructed	02/01/1999
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**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
2566	KOPX-TV	DTV
25382	KWTV-DT	DTV
11964	KBRU	FM
84225	KOCM	DTV
11918	KJYO	FM
66222	KFOR-TV	DTV
58390	KTST	FM
58389	KXXY-FM	FM
38214	KSBI	DTV

**Primary
Tower**

Tower Rigging Costs

Section	Question	Response
Tower Rigging Costs	Complex Tower	Candelabra
Helicopter Services Required	Are helicopter services required?	Yes

**Primary
Tower**

Other Tower Expenses Not Listed

Name	Description
Removal of current	Lease requirement to remove the current antenna and line

**Outside
Professional**

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	1000
	Explanation	Construction supervision by Manhattan construction. Extensive site work required
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	2
	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	No
	For Auxiliary Facility	N/A
	For Main Facility	N/A

	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	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	No
	Address transition timing and coordination issues w/ other stations and wireless providers	No
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	Yes
	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
Binding and insurance	Insurance for the construction

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	Yes
	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?	Yes
	Does this relocation require Equipment Storage?	Yes
	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?	Yes

**Other
Expenses**

Other Expenses Not Listed

Name	Description
Design fees	Architectural design fees

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-60	\$2,588,400.00	\$2,360,700.00		\$0.00	
Transformer 3 phase/480v - 300 KVA	\$36,800.00	\$30,000.00	N/A	N/A	N/A
Asbestos abatement	<i>\$100,000.00</i>	\$100,000.00	N/A	N/A	N/A
Service entrance 3 phase/800 amp /208 volt	\$14,400.00	\$13,700.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,275,000.00	N/A	N/A	N/A
Ice protection	<i>\$300,000.00</i>	\$300,000.00	N/A	N/A	N/A
Other Electrical Service: New electrical distribution	<i>\$285,000.00</i>	\$285,000.00	N/A	N/A	N/A
Removal Disposal	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
30 Ton system	\$166,000.00	\$162,000.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$20,000.00	N/A	N/A	N/A
Other -- Building Addition Size: 2000.0	<i>\$150,000.00</i>	\$150,000.00	N/A	N/A	N/A

Sub-total	\$2,588,400.00	\$2,360,700.00	N/A	\$0.00	N/A
Total for all systems	\$6,540,975.00	\$5,066,600.00	N/A	\$0.00	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 TUM25-04-16/64H-2-R-T	\$937,880.00	\$819,400.00		\$0.00	
KAUT Combiner install	<i>\$60,000.00</i>	\$60,000.00	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
New combiner, cost per channel (without antenna)	\$84,200.00	\$45,000.00	N/A	N/A	N/A
UHF - High Power Top Mount (200-1000 kW), Two Station broadband panel antenna, elliptically or circularly polarized	\$768,000.00	\$690,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Sub-total	\$937,880.00	\$819,400.00	N/A	\$0.00	N/A
Total for all systems	\$6,540,975.00	\$5,066,600.00	N/A	\$0.00	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	\$758,100.00	\$550,000.00		\$0.00	
Rigid Transmission Line - copper, 8 3/16" broadband	\$758,100.00	\$550,000.00	N/A	N/A	N/A
Sub-total	\$758,100.00	\$550,000.00	N/A	\$0.00	N/A
Total for all systems	\$6,540,975.00	\$5,066,600.00	N/A	\$0.00	N/A

Components

Information not provided.

Cost Information

Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower GTOWER	\$601,000.00	\$305,000.00		\$0.00	
Tower Helicopter Lift	<i>\$80,000.00</i>	\$80,000.00	Only if joint operation with other stations	N/A	N/A
Removal of current	<i>\$100,000.00</i>	\$100,000.00	N/A	N/A	N/A
Complex Tower (includes, for example, those with candelabras and /or stacked antennas)	\$421,000.00	\$125,000.00	N/A	N/A	N/A
Primary Tower TOWER	\$1,288,800.00	\$685,000.00		\$0.00	
Serious tower reinforcement /modifications	\$1,052,000.00	\$560,000.00	N/A	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$100,000.00	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	\$25,000.00	N/A	N/A	N/A
Sub-total	\$1,889,800.00	\$990,000.00	N/A	\$0.00	N/A

Total for all systems	\$6,540,975.00	\$5,066,600.00	N/A	\$0.00	N/A
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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
Outside Professional Services	\$255,245.00	\$235,500.00		\$0.00	
Project management of the transition	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Binding and insurance	<i>\$60,000.00</i>	\$60,000.00	Required by Manhattan construction	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
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$11,000.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$4,100.00	\$3,000.00	N/A	N/A	N/A

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Sub-total	\$255,245.00	\$235,500.00	N/A	\$0.00	N/A
Total for all systems	\$6,540,975.00	\$5,066,600.00	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
Other Expenses	\$111,550.00	\$111,000.00		\$0.00	
Design fees	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
MVPD Notification of Channel Change	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
Equipment Storage	<i>\$25,000.00</i>	\$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
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Local Zoning	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Sub-total	\$111,550.00	\$111,000.00	N/A	\$0.00	N/A
Total for all systems	\$6,540,975.00	\$5,066,600.00	N/A	\$0.00	N/A

Components

Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$6,540,975.00	\$5,066,600.00
			\$0.00

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 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.	
		<ol style="list-style-type: none"> 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. 2. 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).
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.

<p>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.</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>Bill Vanduynhoven <i>Director of Engineering Operations</i></p> <p>09/24/2018</p>

Attachments