

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility 74091 Service: DTV Call WPXW-TV Channel: 35 (UHF)

ID: Sign:

0000028678

Number:

File

FRN: **0001808468** Date **07/26**

Submitted: /2018

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
ION MEDIA WASHINGTON LICENSE, INC. Doing Business As: ION MEDIA WASHINGTON LICENSE, INC.	Bianca Frye 601 Clearwater Park Road West Palm Beach, FL 33401 United States	+1 (561) 682- 4110	BiancaFrye@ionmedia. com	Corporation

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Information

Preparer Contact Name and Information

Applicant	Address	Phone	Email
The Prenarer is same as the reimbursement contact			

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, operate from broadband interim antenna and transmission line on pre repack channel utilizing current transmitter. Replace current top mount 3 ch broadband antenna, transmission line and transmitter for operation on post repack channels.

Transmitters

rs	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	
Manufacturer and Type	Model	CD200P2 /UPG Sigma
	Year	1997
	Туре	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	40 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	THU9-24 EVO
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	37 kW
	Justification for New Transmitter	Transmitter cannot be retuned and is no longer supported by manufacturer. Please see attached Harris /GatesAir exhibit. See attached Transmitter Upgrade Disclaimer.

Primary Transmitter

Other Transmitter Costs

•	Section	Question	Response
	Electrical Service	Service Entrance (3 phases 800A 208V)	No
		Switchgear (industrial 800 amp)	No
		Transformer (480V)	Yes
		Power	300 kVA

	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Туре	Cooling Only
	Size	5 tons
	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 Interconnect	Interconnect between RF System and transmission line
Removal of Existing Equipment	Removal of existing transmitters and equipment / Site Prep

Antennas

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

Primary Antenna

Add Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Retune Existing
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Owner	ACC Licensee, LLC
	Site	N/A
	Is this antenna currently shared with any other stations?	Yes
	Is this antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna	Class	Full Power
Manufacturer and Type	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Broadband Panel
	Number of Stations Supported	3
	Number of Panels	12
	Design power capacity in use	75.0 %

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	TUP-O4-12-
Year	1997

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

Facility ID	Call Sign
27772	WHUT-TV
65670	WETA-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
	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
14
33
35

Primary Antenna

Other Antenna Cost Not Listed

Information not provided.

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

Primary Existing Transmission Line Transmission Line

Section	Question	Response
Existing Transmission Line Description	Type of change	Utilize Existing
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Owner	ACC Licensee, LLC
	Site	N/A
	Is the existing transmission line shared with another station or stations?	Yes
	Is Transmission Line in operating condition?	Yes
Existing Transmission	Manufacturer	Dielectric
Line Manufacturer and Type	Туре	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	863 feet per run

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

Facility ID	Call Sign
27772	WHUT-TV
65670	WETA-TV

Other Transmission Line Expenses Not Listed

Pri	ma	ry		
Tra	ans	mi	ssi	or

n Line	Description
Sweep existing transmission line	Sweep existing transmission line

Tower Equipment And Rigging Costs

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

Primary Tower

Existing Tower

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	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?	Unknown
	Is tower compliant with Rev G?	No
Existing Tower Structure	Do you have a tower registration number?	Yes
Registration	ASR Number	1051670
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	38° 57' 01.0" N-
	Longitude (NAD83)	077° 04' 46.0" W-
	Overall Structure Height	691.92 fee
	Support Structure Height	564.95 fee
	Ground Elevation Above Mean Sea Level (AMSL)	409.77 fee

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	ACC Licensee, LLC
Date Constructed	11/12/1998

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
65593	WUSA	DTV
65670	WETA-TV	DTV
1051	WJLA-TV	DTV
27772	WHUT-TV	DTV
70933	WASH	FM
73252	WRQX	FM
65707	WHUR-FM	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:	Major 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

Name	Description
Structural Study	Structural analysis required after tower mapping completed

Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	No
	Number of Hours	N/A
	Explanation	N/A
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	Yes

	Authority	
	Quantity	1
	NEPA Section 106 environmental review	Yes
	Environmental Assessment	Yes
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	Negotiation of Lease and other Matter for Shared Locations	Yes
	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	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside
Professional Services Expenses Not Listed
Professional Services requirement of the control of the contr

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	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
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.

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 THU9-24 EVO	\$1,580,050.00	\$1,005,587.43		\$0.00	
RF Interconnect	\$25,000.00	\$25,000.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$901,337.43	See the attached Rohde and Schwarz transmitter quote.	N/A	N/A
Transformer 3 phase /480v - 300 KVA	\$36,800.00	\$35,000.00	N/A	N/A	N/A
5 Ton system	\$20,250.00	\$19,250.00	N/A	N/A	N/A
Removal of Existing Equipment	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Sub-total	\$1,580,050.00	\$1,005,587.43	N/A	\$0.00	N/A
Total for all systems	\$2,612,120.00	\$1,756,937.43	N/A	\$26,992.99	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 Cos
Primary Antenna TUP-O4-12-2	\$109,880.00	\$110,360.00		\$0.00	
Elbow complex, broadband, at antenna input, per 8 3/16. feedline (if needed)	\$18,950.00	\$11,250.00	N/A	N/A	N/A
New combiner, cost per channel (without antenna)	\$84,200.00	\$92,710.00	See shared equipment, shipping and taxes exhibits and Dielectric quote for more information. Since WHUT was not assigned a different repack channel, WETA and WPXW will have to bear 50% of the cost of the new combiner.	N/A	N/A
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	Current broadband antenna can be utilized.	N/A	N/A
Sub-total	\$109,880.00	\$110,360.00	N/A	\$0.00	N/A
Total for all systems	\$2,612,120.00	\$1,756,937.43	N/A	\$26,992.99	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	\$6,400.00	\$6,400.00		\$0.00	
Sweep existing transmission line	\$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	\$2,612,120.00	\$1,756,937.43	N/A	\$26,992.99	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		Estimated		
Description	Cost Estimate	Estimated Cost	Cost Justification	Actual Cost	Actual Cos
Primary Tower TOWER	\$665,300.00	\$398,125.00		\$20,000.00	
Structural Study	\$7,500.00	\$7,500.00	See Shared Equipment Exhibit for more information.	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$125,000.00	See Shared Equipment Exhibit for more information.	\$20,000.00	N/A
Major tower reinforcement /modifications	\$421,000.00	\$250,000.00	See Shared Equipment Exhibit for more information.	N/A	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$15,625.00	See Shared Equipment Exhibit for more information.	N/A	N/A
Sub-total	\$665,300.00	\$398,125.00	N/A	\$20,000.00	N/A
Total for all systems	\$2,612,120.00	\$1,756,937.43	N/A	\$26,992.99	N/A

Components

Actual Information Description	File Name	
Structural Study	Information not provided.	
Tall Tower (greater than 500')	Component Description: Amount:	Down payment associated with securing tower service. Note that amount is not additional to cost of tower rigging and will be deducted from total cost of tower rigging at the time it is quoted. Supporting documentation attached. This invoice has been paid. \$20,000.00
Major tower reinforcement /modifications	Information not provided.	
Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study	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	\$161,210.00	\$152,750.00		\$6,992.99	
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	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
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	\$10,520.00	\$10,000.00	N/A	N/A	N/A
NEPA Section 106 environmental review, if needed	\$6,310.00	\$6,000.00	N/A	N/A	N/A
Attorney Fees -	\$3,680.00	\$3,500.00	N/A	N/A	N/A

Prepare and File request for Special Temporary Authorization					
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
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 - Negotiation of lease and other matters for shared locations	\$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	\$4,742.99	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$2,000.00	N/A

Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$250.00	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
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Sub-total	\$161,210.00	\$152,750.00	N/A	\$6,992.99	N/A
Total for all systems	\$2,612,120.00	\$1,756,937.43	N/A	\$26,992.99	N/A

Components

Actual Information Description	File Name
Comprehensive coverage verification via field study, if needed	Information not provided.
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.
ASR modification (prepare FCC Form 854)	Information not provided.
Environmental Assessment, if triggered by	Information not provided.

NEPA Section 106 review or for certain structures over 450 feet		
NEPA Section 106 environmental review, if needed	Information not provided.	
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare request for Special Temporary Authorization	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Attorney Fees - Negotiation of lease and other matters for shared locations	Information not provided.	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	Invoice for WPXW's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2 /1/2017 - 12/15 /2017. Payee has corresponded with FCC staff. Hourly supporting documentation and invoice attached. \$4,742.99
	Amount.	ψ 4 ,1 4 2.33

Component Description:

Invoice for station's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff and has provided corrected supporting documentation.

Amount:

\$4,837.97

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application

Component Description: Cost of RF

consultant
preparation of
engineering
section of FCC
Form 2100. Hourly

supporting documentation attached. This invoice has been

paid.

Amount: \$2,000.00

Perform engineering study for new channel assignment and antenna development

Component Description: Cost of RF

new channel
assignment and
antenna
development.
Hourly supporting
documentation
attached. This
invoice has been

consultant work for

paid.

Amount: \$62.50

	Component Description: Amount:	Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid. \$187.50
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.	
Prepare and or review reimbursement form	Information not provided.	
RF Exposure Measurements	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).

			Estimated		
Description	Predetermined Cost Estimate	Estimated Cost	Cost Justification	Actual Cost	Actual Cost Justification
Other Expenses	\$89,280.00	\$83,715.00		\$0.00	
MVPD Notification of Channel Change	\$2,200.00	\$2,200.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$0.00	\$0.00	The amount is yet to be determined (TBD) and ION will submit on-air announcement costs when finalized.	N/A	N/A
Equipment Storage	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$15,000.00	\$15,000.00	N/A	N/A	N/A
Non-zoning permits	\$15,000.00	\$15,000.00	N/A	N/A	N/A
Local Zoning	\$25,000.00	\$25,000.00	N/A	N/A	N/A
FCC Filing Fees - Special	\$195.00	\$190.00	N/A	N/A	N/A

Authorization request					
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	\$6,000.00	N/A	N/A	N/A
Sub-total	\$89,280.00	\$83,715.00	N/A	\$0.00	N/A
Total for all systems	\$2,612,120.00	\$1,756,937.43	N/A	\$26,992.99	N/A

Components

Temporary

Information not provided.

Cost Information

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$2,612,120.00	\$1,756,937.43	\$26,992.99

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

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.

- 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.
- 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.
- 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 abovenamed applicant for the Authorization(s) specified above. Mario
Vasquez
Vice
President Finance,
Operations

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).

- 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.
- 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

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 abovenamed applicant for the Authorization(s) specified above. Mario Vasquez Vice President -Finance, Operations

07/26/2018

Attachments