

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility ID:	37099	Service: DTV	Call Sign:	КШНВ	Channel: 16 (UHF)
File Number:	000002	5207	Ū		
FRN: 000	5935499	Date Submitted:	12/10 /2018		

Applicant Name, Type, and Contact Information

Information

Applicant	Address	Phone	Email	Applicant Type
LeSEA Broadcasting of Tulsa, Inc.	61300 Ironwood Road South Bend, IN 46614 United States	+1 (574) 291-8200	whylton@lesea. com	Not-for- Profit

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Preparer Contact Name and Information

Contact Information	Applicant	Address	Phone	Email
	Joseph C. Chautin III Hardy, Carey, Chautin & Balkin	1080 West Causeway Approach Mandeville, LA 70471 United States	+1 (985) 629- 0777	jchautin@hardycarey. com

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.	No
Briefly describe transition plan	Install new transmitter, antenna, and transmission line.

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	Ultimatte	
		Year	2001	
		Туре	Solid State	
		Solid State Cooling	Liquid Cooled	
		Solid State Power Capacity	4 kW	

Existing Transmitter Information

Primary	New Transmitter Costs			
Transmitter	Section	Question	Response	
	New Transmitter	Use	Primary (Main)	
		Change Type	Purchase New	
		Is this a request for upgraded equipment?	Yes	
		Manufacturer		
		Model	THU9EVO- 4	
		Transmitter Type	Solid State	
		Solid State Cooling	Liquid Cooled	
		Solid State Power capacity	6.5 kW	
		Justification for New Transmitter	Current transmitter can not be retuned	

Primary Other Transmitter Costs

Transmitter	Section	Question	Response
	Electrical Service	Service Entrance (3 phases 800A 208V)	No
		Switchgear (industrial 800 amp)	No
		Transformer (480V)	Yes
		Power	150 kVA
		Rigid Conduit and Wiring	Yes
		Size	1.5 inches
		Length	35.0 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

PrimaryOther Transmitter Cost Not ListedTransmitterInformation not provided.

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

Primary	Add Antenna Information			
Antenna	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 this antenna currently shared with any other stations?	No	
		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 Manufacturer and Type	Class	Full Power	
		Mounting	Side Mount	
		Antenna position in stack	Not in Stack	
		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	
		Upper Limit	N/A	
		Other Antenna Type	N/A	
		ERP: (Effective Radiated Power)	50.0 kW	
			,	

Manufacturer	
Model	TFU- 24DSC-R- C170 DC
Year	2004

Primary	New Antenna Costs			
Antenna	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?	No	
		Is antenna directional?	No	
		Will antenna be located on or in close proximity to an antenna farm?	No	
	New Antenna Manufacturer and Types	Class	Full Power	
		Mounting	Top Mount	
		Antenna position in stack	Not in Stack	
		Polarization	Elliptical	
		Туре	Slotted Coaxial	
		Number of Stations Supported	N/A	
		Number of Panels/Bays	N/A	
		Lower Limit	N/A	
		Upper Limit	N/A	
		Design power capacity in use	N/A	
		Other Antenna Type	N/A	
		ERP: (Effective Radiated Power)	18.0 kW	
		Manufacturer		

Model	TFU16-GTH /VP-R O4
Year	2018
Justification for New Antenna	UPGRADED ANTENNA

Primary Antenna	Other Antenna Costs			
	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	N/A	
		Do you need a combiner output splitter /switcher for dual feed lines?	N/A	
	Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes	
		Broadband or Single Channel?	Single Channel	
		Feed Line Size	3 1/8 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	

Primary	Other Antenna Cost Not Listed		
Antenna	Name	Description	
	MOUNTING PLATE	Mounting plate for base of antenna	

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

Interim New Transmission Line

Transmission Line

Transmission	Section	Question	Response
	New Transmission Line Costs	Use	Interim
		Description of Use	N/A
		Change Type	Purchase New
		Туре	Flexible Foam
		Diameter	1 5/8 inches
		Segment Length	N/A
		Other Segment Length	
		Number of parallel runs	1
		Length	150 feet per run
		Justification for New Transmission Line	Interim Operation

Interim	Other Transmission Line Expenses Not Listed	
Transmissio	onLine	Description

sion	Description
Connectors Etc.	1-5/8 connectors, bullets, standoffs etc

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

marv	Existing	Tower
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Primary	Existing Tower				
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?	No		
		Is this tower currently shared with any other stations?	No		
		One or more FM, AM or TV radio broadcaster(s)	N/A		
		Others Types of Users	N/A		
		Is tower documented for structural analysis?	Yes		
		Is tower compliant with Rev G?	No		
	Existing Tower Structure Registration	Do you have a tower registration number?	No		
		ASR Number			
	Coordinates (NAD83 (North American Datum of	Latitude (NAD83)	36° 02' 35.3" N-		
	1983))	Longitude (NAD83)	095° 57' 12.0" W-		
		Overall Structure Height	1838.89 feet		
		Support Structure Height	1838.89 feet		
		Ground Elevation Above Mean Sea Level (AMSL)	709.97 feet		

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	TULSA TOWER JOINT VENTURE
Date Constructed	09/01/1984

Primary Tower Rigging Costs

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

Other Tower Expenses Not Listed

Primary Tower

Information not provided.

Outside	Section	Question	Response
Professional	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	650
		Explanation	LeSEA doesn't have sufficient staff to deal with the issues related to invoice filing and dealing with the FCC rejections.
	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	No
		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	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	Yes
	RF exposure measurements	No
	Additional Field Engineering Service	Yes
	Number of Days	1
	Justification	Project Coordination

 Outside
 Other Professional Services Expenses Not Listed

 Professional
 Services Costs
 Description

Antenna Replacement	Expenses to remove and replace antennas
Consultant	Planning, consulting, cooridination

Other	Section	Question	Response
Expenses	AM Pattern Disturbance	Is an Impact Study needed?	No
		Is Remediation needed?	No
	Facility Expenses	Name	N/A
		Other Distributed Transmission System Expenses Not listed	N/A
		Name	N/A
		Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
	Permit and Filing Costs	Local Zoning	No
		Non-zoning permits	No
		BLM or NFS Coordination	No
		FCC Construction Permit Minor Change	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?	No

Other Expenses Not Listed

Other Expenses					
	Name	Description			
	Travel Expenses	Travel and lodging expenses for being on site			

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 THU9EVO-4	\$304,050.00	\$295,591.86		\$236,393.65	
1.5" Rigid Conduit and Wiring	\$5,000.00	\$5,000.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW	\$273,500.00	\$266,291.86	Upgraded 6.5KW transmitter.	\$236,393.65	N/A
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	N/A	N/A
Sub-total	\$304,050.00	\$295,591.86	N/A	\$236,393.65	N/A
Total for all systems	\$1,094,387.20	\$922,691.13	N/A	\$563,486.79	N/A

Actual Information Description	File Name
1.5" Rigid Conduit and Wiring	Information not provided.

UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW	Component Description: Amount:	30% of quoted 4.9 kW transmitter costs \$68,493.50
	Component Description:	70% of quoted 4.9 kW transmitter cost
	Amount:	\$159,818.15
	Component Description: Amount:	Electrical Work at CityPlex Towers \$8,082.00
Transformer 3 phase/480v - 150 KVA	Information not provided.	

Antennas

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna TFU16-GTH /VP-R O4	\$327,003.20	\$237,221.27		\$204,079.65	
MOUNTING PLATE	\$23,173.20	\$23,173.20	N/A	\$21,873.20	N/A
Elbow complex, single channel, at antenna input, per 3 1 /8. feedline (if needed)	\$7,600.00	\$7,400.00	N/A	N/A	N/A
UHF - High Power Top Mount (200- 1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$200,150.30	N/A	\$175,708.68	N/A
Sweep test of existing antenna	\$6,730.00	\$6,497.77	N/A	\$6,497.77	Z
Sub-total	\$327,003.20	\$237,221.27	N/A	\$204,079.65	N/A
Total for all systems	\$1,094,387.20	\$922,691.13	N/A	\$563,486.79	N/A

Components

Actual Information
Description File Name

MOUNTING PLATE		
	Component Description:	Fabricate
		antenna wall mounting bracket
		pedestal
	Amount:	\$21,873.20
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	Information not provided.	
UHF - High Power Top		
Mount (200-1000 kW), One station antenna , elliptically	Component Description:	down payment on invoice
or circularly polarized	Amount:	\$80,433.94
	Component Description:	remaining
		approved amount
		of invoice- we will
		pay for the
		upgrade
	Amount:	\$95,274.74
	Component Description:	Fabricate
		antenna wall
		mounting bracket
	Amount:	pedestal \$21,873.20
Sweep test of existing		
antenna	Component Description:	Primary antenna
		sweep test
	Amount:	\$3,520.00
	Component Description:	Primary antenna
		sweep test
	Amount:	\$2,977.77

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
Interim Transmission Line	\$4,404.00	\$4,254.00		\$2,561.26	
Flexible Foam Transmission Line - dielectric, 1 5 /8"	\$3,600.00	\$3,450.00	N/A	\$2,561.26	N/A
Connectors Etc.	\$804.00	\$804.00	N/A	N/A	N/A
Sub-total	\$4,404.00	\$4,254.00	N/A	\$2,561.26	N/A
Total for all systems	\$1,094,387.20	\$922,691.13	N/A	\$563,486.79	N/A

Actual Information Description	File Name	
Flexible Foam Transmission Line - dielectric, 1 5/8"	Component Description: Amount:	Primary transmission line \$1,167.04
	Component Description: Amount:	Primary transmission line \$1,394.22
Connectors Etc.	Information not provided.	

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 TOWER	\$210,500.00	\$155,600.00		\$92,900.00	
Tall Tower (greater than 500')	\$210,500.00	\$155,600.00	N/A	\$92,900.00	N/A
Sub-total	\$210,500.00	\$155,600.00	N/A	\$92,900.00	N/A
Total for all systems	\$1,094,387.20	\$922,691.13	N/A	\$563,486.79	N/A

Actual Information Description	File Name	
Tall Tower (greater than 500')		
	Component Description:	Tower Rigging Services-
	Amount:	Helicopter Lift \$69,075.00
	Component Description:	Tower Rigging Services-
	Amount:	Helicopter Lift \$23,825.00
	Component Description:	deposit on
		needed tower
		services
	Amount:	\$23,825.00

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	\$227,880.00	\$217,250.00		\$23,977.23	
Additional Field Engineering Service, 1 Days	\$8,000.00	\$8,000.00	Preplannin	\$2,394.73	N/A
Project management of the transition	\$102,700.00	\$97,500.00	Widelity quote plus additional hours per DTVPros invoices	\$21,582.50	N/A
Consultant	\$8,000.00	\$8,000.00	N/A	\$0.00	N/A
Antenna Replacement	\$0.00	\$0.00	0	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	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 FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A

Total for all systems	\$1,094,387.20	\$922,691.13	N/A	\$563,486.79	N/A
Sub-total	\$227,880.00	\$217,250.00	N/A	\$23,977.23	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
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A

Actual Information	
Description	File Name

Additional Field Engineering Service, 1 Days	Component Description:	Professional
		Services through 9
		/29/18
	Amount:	\$1,194.73
	Component Description: Amount:	1 day/8 hours at \$150 an hour \$1,200.00

transition	Component Description:	Project
	component Description.	Management
	Amount:	\$2,239.65
	Component Description:	Project
		Management
	Amount:	\$2,199.30
	Component Description:	Project
	i i i i i i i i i i i i i i i i i i i	Management
	Amount:	\$3,060.20
	Component Description:	Project
	•	Management
	Amount:	\$2,954.50
	Component Description:	Project
		Management
	Amount:	\$4,088.65
	Component Description:	Project
		Management
	Amount:	\$5,056.40
	Component Description:	Project
		Management
	Amount:	\$3,240.00
	Component Description:	Project
		Management
	Amount:	\$1,983.80
Consultant	Information not provided.	
Antenna Replacement	Information not provided.	

	Comprehensive coverage verification via field study, if needed	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	Information not provided.
	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.
	Prepare and or review reimbursement form	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	\$20,550.00	\$12,774.00		\$3,575.00	
Travel Expenses	\$3,500.00	\$3,500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$2,500.00	\$2,500.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$3,774.00	N/A	\$3,575.00	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$3,000.00	\$3,000.00	N/A	N/A	N/A
Sub-total	\$20,550.00	\$12,774.00	N/A	\$3,575.00	N/A
Total for all systems	\$1,094,387.20	\$922,691.13	N/A	\$563,486.79	N/A

Actual Information Description	File Name
Travel Expenses	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.

Notification	Component Description:	Notification of Medical Facilities
	Amount:	\$3,575.00
Disposal Costs (for	Information not provided.	
equipment and other waste, net of any salvage value)		

Cost Information	Grand Total			
		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$1,094,387.20	\$922,691.13	\$563,486.79

Reimbursem	enrestanus	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.	Tony Agostino CFO 12/10/2018

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.

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.	
an au name	are, under penalty of perjury, that I am thorized representative of the above- d applicant for the Authorization(s) ried above.	Tony Agostino CFO 12/10/2018

Attachments