



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **73363-28** | Service: **DRT** | Call **WNYT** | Channel: **28 (UHF)**
ID: | Sign:
File **0000089339**
Number:
FRN: **0005828736** | Eligibility **Eligible** | Date **11/13**
Status: | Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|---|---|----------------------|-------------------------|---------------------------------|
| WNYT-TV, LLC Doing Business As: WNYT-TV, LLC | Ryan Vandewiele 3415 University Ave., West St. Paul, MN 55114 United States | +1 (651) 642-4334 | RVandewiele@hbi. com | Limited Liability Company |

Reimbursement Contact Information

Reimbursement Contact Name and Information

| Applicant | Address | Phone | Email |
|----------------|---------|-------|-------|
| [Confidential] | | | |

Preparer Contact Information

Preparer Contact Name and Information

| Applicant | Address | Phone | Email |
|---|--|-----------------------|--------------------------------|
| Charles R. Naftalin <i>Legal Counsel</i> <i>Holland & Knight LLP</i> | 800 17th Street, N. W. Suite #1100 Washington, DC 20006 United States | +1 (202) 457- 7040 | charles.naftalin@hklaw. 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. | No |
| Briefly describe transition plan | WNYT DRT (Glens Falls) will install a new transmitter, transmission line, and antenna on its existing tower. |

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) |
| | Ownership | Owned |
| | Is this transmitter currently shared with another station? | No |
| | Is this transmitter currently in operating condition? | Yes |
| Existing Transmitter Manufacturer and Type | Manufacturer | |
| | Model | DTXPRO-1.2KUR |
| | Year | 2012 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 1200 W |

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 | UAXTE-4R44 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power capacity | 2400 W |
| | Justification for New Transmitter | Existing transmitter is channel specific and cannot be modified. Original transmitter manufacturer is defunct. See "Cost" section for explanation of required power increase. |

Primary Transmitter

Other Transmitter Costs

| Section | Question | Response |
|--------------------------------|---|----------|
| Other Transmitter Costs | Does the transmitter installation require a Transmitter Building Site Survey /Installation? | Yes |
| Electrical Service | Service Entrance (3 phases 800A 208V) | No |
| | Switchgear (industrial 800 amp) | No |

| | | |
|--|---|--|
| | Transformer (480V) | No |
| | Rigid Conduit and Wiring | Yes |
| | Size | 1 inches |
| | Length | 32.0 feet |
| | Other Electrical Service | Yes |
| | Description | A new circuit breaker, disconnect panel, and flexible jumper are required. |
| HVAC Service | Does the replacement transmitter require HVAC Service? | No |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leasehold improvement? | No |

Primary Transmitter

Other Transmitter Cost Not Listed

| Name | Description |
|----------------------------|--|
| Translator Receiver | Sencore MRD 2600 ATSC Receiver |
| Remote Control | Remote Control Interface for New Transmitter |

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) |
| | Ownership | Owned |
| | Is the existing antenna shared with another station or stations? | Yes |
| | Is the existing antenna directional? | Yes |
| | Is antenna in operating condition? | Yes |
| | Is antenna located on or in close proximity to an antenna farm? | No |
| Existing Antenna Manufacturer and Type | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Elliptical |
| | Type | Slotted Coaxial |
| | ERP: (Effective Radiated Power) | 15.0 kW |
| | Manufacturer | |
| | Model | TLP-12 |
| | Year | 2012 |

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

| Facility ID | Call Sign |
|-------------|-----------|
| 73942 | WRGB |

**Primary
Antenna**

New Antenna Costs

| Section | Question | Response |
|---|--|-----------------|
| New Antenna Description | Use | Primary (Main) |
| | Change Type | Purchase New |
| | Ownership | Owned |
| | 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 | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Elliptical |
| | Type | Slotted Coaxial |
| | ERP: (Effective Radiated Power) | 15.0 kW |
| | Manufacturer | |
| | Model | TLP-12 |
| | Year | 2019 |
| Justification for New Antenna | Current Antenna is Channel Specific to existing "out of core" frequencies. | |

**Primary
Antenna**

Other Antenna Costs

| Section | Question | Response |
|---------|----------|----------|
|---------|----------|----------|

| | | |
|---------------------------------|---|------------------------|
| Elbow Complex | Do you require the separate purchase of the Elbow Complex? | Yes |
| | Broadband or Single Channel? | Single Channel |
| | Feed Line Size | 1 5/8 inches inches |
| Side Mount Brackets | Do you require the separate purchase of side mount brackets for a high power antenna? | Yes |
| 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 Antenna

Other Antenna Cost Not Listed

Information not provided.

**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) |
| | Ownership | Owned |
| | Is the existing transmission line shared with another station or stations? | Yes |
| | Is Transmission Line in operating condition? | Yes |
| Existing Transmission Line Manufacturer and Type | Manufacturer | |
| | Type | Flexible Air |
| | Diameter | 1 5/8 inches |
| | Number of parallel runs | 1 |
| | Length | 150 feet per run |

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

| Facility ID | Call Sign |
|-------------|-----------|
| 73942 | WRGB |

**Primary
Transmission
Line** **New Transmission Line**

| Section | Question | Response |
|------------------------------------|--|---|
| New Transmission Line Costs | Use | Primary (Main) |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | No |
| | Type | Flexible Foam |
| | Diameter | 1 5/8 inches |
| | Number of parallel runs | 1 |
| | Length | 250 feet per run |
| | Justification for New Transmission Line | Existing transmission line does not extend to proposed new antenna mounting position. |
| Interior RF Systems | Does the Installation of the Transmission Line require an additional or replacement Inside RF system including switching, patch panels, and dehydrators? | Yes |

**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

Existing Tower

| Section | Question | Response |
|---|---|-------------------|
| Existing Tower Description | Type of change | Modify Existing |
| | Tower Use | Primary (Main) |
| | 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 | Yes |
| | 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 | 1200269 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 43° 18' 17.0" N- |
| | Longitude (NAD83) | 073° 45' 05.0" W- |
| | Overall Structure Height | 223.09 feet |
| | Support Structure Height | 223.09 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 1319.87 feet |

| | |
|------------------|--|
| Structure Type | TOWER - Free Standing or Guyed Structure |
| Tower Owner | Capital Media Corporation |
| Date Constructed | 03/26/2007 |

**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 |
|-------------|-----------|---------|
| 68052 | W47CM | LPX |
| 73942 | WRGB | DTV |
| 8678 | WBAR-FM | FM |

Other Types of Users

| Users |
|---------------|
| Public Safety |
| Land Mobile |

**Primary
Tower**

Tower Modification Costs

| Section | Question | Response |
|-----------------------------|--|---|
| Engineering Study | Please what type of engineering study is required, if any: | Study need for guyed or free-standing 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

Information not provided.

Outside Professional Services Costs

| Section | Question | Response |
|---|---|--|
| Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 80 |
| | Explanation | WNYT intends to obtain project management services through its transmitter and antenna manufacturers for installation of their respective equipment. |
| Outside RF consulting Engineering Services | Perform engineering study for displacement application | 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 |
| | Prepare Form 601 | No |
| Attorney and Other Outside Consulting Services | Prepare and file Form FCC Construction Permit Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |

| | | |
|--------------------------------------|--|-----|
| | Prepare and file Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary Authority | Yes |
| | Quantity | 1 |
| | Negotiation of Lease and other Matter for Shared Locations | No |
| | Prepare or Review FCC Form 399 for Reimbursement | Yes |
| | Form 399 assistance or other program management costs | Yes |
| RF Field Engineering Services | Comprehensive coverage verification via field study | Yes |
| | RF exposure measurements | Yes |
| | Additional Field Engineering Service | No |

Other Professional Services Expenses Not Listed

**Outside
Professional
Services
Costs**

Information not provided.

Other Expenses

| Section | Question | Response |
|---|--|----------|
| AM Pattern Disturbance | Is an Impact Study needed? | No |
| | Is Remediation needed? | No |
| Permit and Filing Costs | FCC Construction Permit Major Change | No |
| | FCC Construction Permit Minor Change | Yes |
| | 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 |
| Point to Point Microwave (STL/ICR) | Frequency Coordination for Unidirection System | No |
| | Frequency Coordination for Bi-Direction System | No |
| | New Point to Point Microwave System | No |

Other Expenses

Other Expenses Not Listed

| Name | Description |
|-------------------------|--|
| Filter, Receiver | Filter for Receiving Off-Air Signal for Studio in a high-RF environment. |

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 UAXTE-4R44 | \$107,249.00 | \$100,104.46 | | \$0.00 | |
| Remote Control | <i>\$5,916.00</i> | \$5,916.00 | Estimated Cost Determined by Manufacturer's Quote | N/A | N/A |
| Translator Receiver | <i>\$3,333.00</i> | \$3,333.00 | N/A | \$0.00 | N/A |
| 1" Rigid Conduit and Wiring | <i>\$2,000.00</i> | \$2,000.00 | N/A | N/A | N/A |
| Other Electrical Service: A new circuit breaker, disconnect panel, and flexible jumper are required. | <i>\$2,000.00</i> | \$2,000.00 | N/A | N/A | N/A |
| Transmitter Building Site Survey /Installation | \$10,000.00 | \$17,830.00 | Estimated cost from transmitter manufacturer's quotes for site survey and installation. | N/A | N/A |

| | | | | | |
|---|--------------|--------------|---|--------|-----|
| UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW | \$84,000.00 | \$69,025.46 | This facility is changing from directional to non-directional operation at the same power level. The gain of the proposed antenna is lower than that of the current directional antenna, requiring an increase transmitter output power to 2030W. | N/A | N/A |
| Sub-total | \$107,249.00 | \$100,104.46 | N/A | \$0.00 | N/A |
| Total for all systems | \$375,426.10 | \$327,516.06 | 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 TLP-12 | \$39,541.00 | \$31,949.00 | | \$0.00 | |
| Elbow complex, single channel, 1 5/8" input (if needed) | \$6,900.00 | \$880.00 | N/A | N/A | N/A |
| Side Mount antenna brackets | \$4,625.00 | \$2,383.00 | N/A | N/A | N/A |
| Sweep test of transmission line and antenna | \$5,730.00 | \$6,400.00 | Per antenna manufacturer's quote. | N/A | N/A |
| UHF-Low Power, Side Mount, Slotted Coaxial, 15.0 kW input, Elliptical | <i>\$22,286.00</i> | \$22,286.00 | N/A | N/A | N/A |
| Sub-total | \$39,541.00 | \$31,949.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$375,426.10 | \$327,516.06 | 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 | \$13,248.60 | \$10,570.60 | | \$0.00 | |
| Flexible Foam Transmission Line - dielectric, 1 5/8" | \$6,000.00 | \$3,322.00 | N/A | N/A | N/A |
| Interior RF Systems: Inside RF system including switching, patch panels and dehydrators | <i>\$7,248.60</i> | \$7,248.60 | Estimated quote is based on transmitter manufacturer's quote for a station load and patch panel. | N/A | N/A |
| Sub-total | \$13,248.60 | \$10,570.60 | N/A | \$0.00 | N/A |
| Total for all systems | \$375,426.10 | \$327,516.06 | 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 TOWER | \$114,890.00 | \$101,000.00 | | \$0.00 | |
| Tower Rigging Short Tower (less than 500') | \$56,190.00 | \$45,000.00 | N/A | N/A | N/A |
| Major tower reinforcement /modifications | <i>\$50,000.00</i> | \$50,000.00 | Estimated cost awaiting definitive quote following completion of engineering study. | N/A | N/A |
| Study needed for guyed or free-standing tower | \$8,700.00 | \$6,000.00 | N/A | N/A | N/A |
| Sub-total | \$114,890.00 | \$101,000.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$375,426.10 | \$327,516.06 | N/A | \$0.00 | N/A |

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 | \$94,922.50 | \$78,727.00 | | \$0.00 | |
| RF Exposure Measurements | \$12,100.00 | \$9,000.00 | N/A | N/A | N/A |
| Comprehensive coverage verification via field study, if needed | \$52,600.00 | \$40,000.00 | N/A | N/A | N/A |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | \$2,235.00 | \$2,230.00 | N/A | N/A | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$3,025.00 | \$3,020.00 | N/A | N/A | N/A |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$2,102.50 | \$2,100.00 | N/A | N/A | N/A |
| Prepare/ Review 399 reimbursement form | \$1,710.00 | \$1,700.00 | N/A | N/A | N/A |
| Project management of the transition | \$8,440.00 | \$8,000.00 | N/A | N/A | N/A |

| | | | | | |
|---|-------------------|--------------|---------------------|--------|-----|
| Prepare request for Special Temporary Authorization | \$1,280.00 | \$1,250.00 | N/A | N/A | N/A |
| Form 399 assistance or other Program Management costs | <i>\$7,000.00</i> | \$7,000.00 | See attached quote. | N/A | N/A |
| Perform engineering study for displacement application | \$1,800.00 | \$1,800.00 | N/A | N/A | N/A |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,052.50 | \$1,050.00 | N/A | N/A | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application | \$1,577.50 | \$1,577.00 | N/A | N/A | N/A |
| Sub-total | \$94,922.50 | \$78,727.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$375,426.10 | \$327,516.06 | 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 | \$5,575.00 | \$5,165.00 | | \$0.00 | |
| Filter, Receiver | <i>\$325.00</i> | \$325.00 | This cost is to replace an existing channel filter to receive the Channel 28 DRT for our studio in a high-RF environment. | N/A | N/A |
| Equipment Storage | <i>\$1,000.00</i> | \$1,000.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | <i>\$1,000.00</i> | \$1,000.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$1,500.00</i> | \$1,500.00 | N/A | N/A | N/A |
| FCC Filing Fees - Special Temporary Authorization request | \$305.00 | \$200.00 | N/A | N/A | N/A |
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$335.00 | N/A | N/A | N/A |
| FCC Filing Fees - Form 2100 minor change CP application | \$1,110.00 | \$805.00 | N/A | N/A | N/A |

| | | | | | |
|------------------------------|--------------|--------------|-----|--------|-----|
| Sub-total | \$5,575.00 | \$5,165.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$375,426.10 | \$327,516.06 | 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 | \$375,426.10 | \$327,516.06 | \$0.00 |

Reimbursement Status

| Question | Response |
|--|-----------------|
| The facility has ceased operating on its pre-auction channel. | |
| 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 |
|---------------|---|---|----------|
| | <p>Submission of Estimated Expenses Statements</p> | <p>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.</p> | |
| | | <ol style="list-style-type: none"> <li data-bbox="758 772 1045 1176">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. <li data-bbox="758 1198 1029 1444">2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. <li data-bbox="758 1467 1045 1747">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 above-named applicant for the Authorization(s) specified above.

Ryan Vandewiele
Vice President

11/13/2019

| Certification | Section | Question | Response |
|---------------|---|--|----------|
| | Submission of Actual Cost Documentation Statements | <p>WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).</p> | |
| | | <ol style="list-style-type: none"> 1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct. 3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. | |

4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD) .
6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

| | |
|--|--|
| <p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.</p> | |
| <p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p> | <p>Ryan Vandewiele <i>Vice President</i></p> <p>11/13/2019</p> |

Attachments