



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **66781-18-54680** | Service: **DRT** | Call **KIRO-TV** | Channel:
ID: | Sign:
18 (UHF) | File **0000086807**
Number:
FRN: **0014361620** | Eligibility **Eligible** | Date **07/23**
Status: | Submitted: **/2020**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
KIRO-TV, INC. Doing Business As: KIRO-TV, INC.	Chief Engineer 2807 THIRD AVENUE SEATTLE, WA 98121 United States	+1 (206) 728-7777	knealey@kIRO7. com	Corporation

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
Keith Nealey <i>Engineering Manager</i> <i>KIRO-TV, Inc.</i>	Chief Engineer 2807 THIRD AVENUE SEATTLE, WA 98121 United States	+1 (206) 728- 7777	knealey@kIRO7. 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		We powered down the old transmitter, took down the old antenna and removed the old transmitter. We then installed the new transmitter and antenna in place of the old ones using existing wave guide. This occurred in a three hour period in Nov. of 2018.

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	TTHDU-250
	Year	2009
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	180 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?	No
	Manufacturer	
	Model	UAXTE-3P- C-600W
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	600 kW
	Justification for New Transmitter	Location within the predicted noiselimited contour of and predicted interference greater than 0.5 percent to Post- Incentive- Auction Spectrum Repack facilities of Full-Service station KWDK on Channel 34, which itself is being repacked from Channel 42.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Other Transmitter Costs	Does the transmitter installation require a Transmitter Building Site Survey /Installation?	No
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Rigid Conduit and Wiring	No
	Other Electrical Service	No
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

Information not provided.

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?	No
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Bottom
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	1
	Number of Panels	4
	Design power capacity in use	33.0 %
	Lower Limit	692.00 MHz
	Upper Limit	698.00 MHz
	ERP: (Effective Radiated Power)	0.95 kW
	Manufacturer	
	Model	ALP4L1- HSP-51
	Year	2009

**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?	Yes
New Antenna Manufacturer and Types	Mounting	Side Mount
	Antenna position in stack	Bottom
	Polarization	Horizontal
	Type	Slotted Coaxial
	ERP: (Effective Radiated Power)	0.95 kW
	Manufacturer	
	Model	AL4P-18M
	Year	2018
	Justification for New Antenna	Antenna cannot be retuned to Channel 18 from 51

**Primary
Antenna**

Other Antenna Costs

Section	Question	Response
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No

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?	No

**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?	No

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?	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?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1056094
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	47° 30' 16.3" N-
	Longitude (NAD83)	121° 58' 10.0" W-
	Overall Structure Height	310.04 feet

	Support Structure Height	270.01 feet
	Ground Elevation Above Mean Sea Level (AMSL)	2838.88 feet
	Structure Type	LTOWER - Lattice Tower
	Tower Owner	American Towers LLC
	Date Constructed	12/01/1998

**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
20356	KSWD	FM
1091	KJAQ	FM
57843	KNUC	FM
56852	KWPX-TV	DTV
4630	KQMV	FM
35419	KWDK	DTV
20357	KZOK-FM	FM

**Primary
Tower**

Tower Modification Costs

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

**Primary
Tower**

Tower Rigging Costs

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

**Primary
Tower**

Other Tower Expenses Not Listed

Name	Description
Tower Climbers	Rigged tower, removed old antenna, attached new antenna
Tower Climbers	Moved translator receive antenna to lower position on tower

**Outside
Professional**

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	No
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	No
	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	2
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	No

	Form 399 assistance or other program management costs	No
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	No

Outside Other Professional Services Expenses Not Listed
Professional Services Costs Services 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	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)?	No
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	No
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

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 UAXTE-3P-C-600W	\$28,000.00	\$28,000.00		\$26,837.19	
UHF - Air Cooled Solid State Transmitter 600 kW	<i>\$28,000.00</i>	\$28,000.00	N/A	\$26,837.19	N/A
Sub-total	\$28,000.00	\$28,000.00	N/A	\$26,837.19	N/A
Total for all systems	\$130,827.50	\$68,820.97	N/A	\$64,775.71	N/A

Components

Actual Information	
Description	File Name
UHF - Air Cooled Solid State Transmitter 600 kW	<div><div>Component Description:</div><div>Full amount of Transmitter plus tax. See quote "Cox Media- ISSAQUAH KIRO Q-76153 Quote. pdf" for power and cooling details.</div><div>Amount:</div><div>\$26,837.19</div></div>

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 AL4P-18M	\$14,000.00	\$14,000.00		\$13,242.50	
UHF-Low Power, Side Mount, Slotted Coaxial, 0.95 kW input, Horizontal	<i>\$14,000.00</i>	\$14,000.00	N/A	\$13,242.50	N/A
Sub-total	\$14,000.00	\$14,000.00	N/A	\$13,242.50	N/A
Total for all systems	\$130,827.50	\$68,820.97	N/A	\$64,775.71	N/A

Components

Actual Information	
Description	File Name
UHF-Low Power, Side Mount, Slotted Coaxial, 0.95kW input, Horizontal	<div>Component Description:Combination of invoices KIRO-52058 & KIRO-001, with tax and freight included. See cover letter "ISSAQUAH TRANSLATOR COVER LETTER FOR INVOICE COMBINATION.pdf" for details</div> <div>Amount:\$13,242.50</div>

Cost Information **Transmission Line**
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 LTOWER	\$9,200.00	\$9,200.00		\$8,808.00	
Tower Climbers	<i>\$1,200.00</i>	\$1,200.00	N/A	\$1,101.00	N/A
Complex Tower (includes, e.g., towers with candelabras and/or stacked antennas)	<i>\$8,000.00</i>	\$8,000.00	N/A	\$7,707.00	N/A
Sub-total	\$9,200.00	\$9,200.00	N/A	\$8,808.00	N/A
Total for all systems	\$130,827.50	\$68,820.97	N/A	\$64,775.71	N/A

Components

Actual Information	
Description	File Name
Tower Climbers	<div><div>Component Description:</div><div>Lower receive antenna so as not to get RF interference from transmitter</div><div>Amount:</div><div>\$1,101.00</div></div>

<p>Complex Tower (includes, e. g., towers with candelabras and/or stacked antennas)</p>	<table> <tr> <td data-bbox="715 98 1141 392"> <p>Component Description:</p> </td><td data-bbox="1141 98 1412 392"> <p>Rig tower, remove existing antenna and hang new antenna in its place. Waveguide rerouting.</p> </td></tr> <tr> <td data-bbox="715 392 1141 497"> <p>Amount:</p> </td><td data-bbox="1141 392 1412 497"> <p>\$7,707.00</p> </td></tr> </table>	<p>Component Description:</p>	<p>Rig tower, remove existing antenna and hang new antenna in its place. Waveguide rerouting.</p>	<p>Amount:</p>	<p>\$7,707.00</p>
<p>Component Description:</p>	<p>Rig tower, remove existing antenna and hang new antenna in its place. Waveguide rerouting.</p>				
<p>Amount:</p>	<p>\$7,707.00</p>				

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	\$78,727.50	\$16,720.97		\$14,996.21	
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$4,470.00	\$5,188.00	Staggered RF power increases required multiple changes to the STA request during a period of 3 months.	\$5,188.00	N/A
Perform engineering study for displacement application	\$1,800.00	\$1,500.00	N/A	\$1,430.38	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$1,200.00	N/A	\$1,017.86	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,052.50	\$500.00	N/A	\$300.00	N/A
RF Exposure Measurements	\$12,100.00	\$500.00	N/A	\$150.00	N/A

Comprehensive coverage verification via field study, if needed	\$52,600.00	\$5,000.00	N/A	\$4,312.15	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$1,577.50	\$1,632.97	FCC filing fees are included in the legal costs	\$1,632.97	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$3,025.00	\$1,200.00	N/A	\$964.85	N/A
Sub-total	\$78,727.50	\$16,720.97	N/A	\$14,996.21	N/A
Total for all systems	\$130,827.50	\$68,820.97	N/A	\$64,775.71	N/A

Components

Actual Information	
Description	File Name
Attorney Fees - Prepare and File request for Special Temporary Authorization	<p>Component Description: Legal STA application portion of Issaquah Translator - see Cooley 399 costs worksheet - Issaquah.pdf</p> <p>Amount: \$5,188.00</p>

Perform engineering study for displacement application	<p>Component Description:</p> <p>RF displacement study portion of Issaquah translator - See Merrill Weiss 399 costs worksheet - Issaquah.pdf</p> <p>Amount:</p> <p>\$1,430.38</p>
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<p>Component Description:</p> <p>RF CP application portion of Issaquah translator - See Merrill Weiss 399 costs worksheet - Issaquah.pdf</p> <p>Amount:</p> <p>\$1,017.86</p>
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	<p>Component Description:</p> <p>RF LTC application portion of Issaquah translator - See Merrill Weiss 399 costs worksheet - Issaquah.pdf</p> <p>Amount:</p> <p>\$300.00</p>
RF Exposure Measurements	<p>Component Description:</p> <p>RF measurement portion of Issaquah translator - See Merrill Weiss 399 costs worksheet - Issaquah.pdf</p> <p>Amount:</p> <p>\$150.00</p>

Comprehensive coverage verification via field study, if needed	<p>Component Description:</p> <p>RF study portion of Issaquah translator - See Merrill Weiss 399 costs worksheet - Issaquah.pdf</p> <p>Amount:</p> <p>\$4,312.15</p>
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	<p>Component Description:</p> <p>Legal LTC application portion of Issaquah Translator - see Cooley 399 costs worksheet - Issaquah.pdf</p> <p>Amount:</p> <p>\$1,632.97</p>
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<p>Component Description:</p> <p>Legal CP application portion of Issaquah Translator - see Cooley 399 costs worksheet - Issaquah.pdf</p> <p>Amount:</p> <p>\$964.85</p>

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	\$900.00	\$900.00		\$891.81	
Equipment Delivery and Handling Charges	<i>\$900.00</i>	\$900.00	N/A	\$891.81	N/A
Sub-total	\$900.00	\$900.00	N/A	\$891.81	N/A
Total for all systems	\$130,827.50	\$68,820.97	N/A	\$64,775.71	N/A

Components

Actual Information Description	File Name
Equipment Delivery and Handling Charges	<div>Component Description: Freight for Issaquah Translator transmitter</div> <div>Amount: \$891.81</div>

Cost Information	Grand Total			
		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$130,827.50	\$68,820.97	\$64,775.71

Reimbursement Status	Question	Response
	The facility has ceased operating on its pre-auction channel.	Yes
	Construction of final facilities or all necessary modifications are complete.	Yes
	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	<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"> 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>Keith Nealey <i>Director of Engineering</i></p> <p>07/23/2020</p>

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>Keith Nealey <i>Director of Engineering</i></p> <p>07/23/2020</p>

Certification	Section	Question	Response
	Submission of Final Allocation or Accounting Information Statements	<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"> 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. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 2. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. 	

3. The above-named entity certifies that all costs identified as "actual costs" herein accurately represent the costs actually paid by the above-named entity, including any discounts, refunds, or rebates.
4. 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.
5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
6. 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.

**Keith
Nealey**
*Director of
Engineering*

07/23/2020

Attachments