

(REFERENCE COPY - Not for submission)

### FCC Form 399: Reimbursement Request

Facility 17544 Service: DCA Call WYBU-CD Channel: 26 (UHF)

Sign:

File **0000027787** 

Number:

ID:

FRN: **0010360873** Date **07/25** 

Submitted: /2020

## Applicant Information

### **Applicant Name, Type, and Contact Information**

Applicant	Address	Phone	Email	Applicant Type
CHRISTIAN TELEVISION NETWORK, INC. Doing Business As: CHRISTIAN TELEVISION NETWORK, INC.	PO BOX 6922 Clearwater, FL 33758 United States	+1 (727) 535- 5622	soneal@ctntv. net	Not-for- Profit

### 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
Joseph C. Chautin III Hardy, Carey, Chautin & Balkin, LLP	1080 West Causeway Approach Mandeville, LA 70471 United States	+1 (985) 629-0777	jchautin@hardycarey. 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	WYBU will be off the air for 2 or 3 days while existing antenna, transmitter and mask filter are replaced with similar equipment that is capable of operating on the new channel.

### **Transmitters**

Section	Question	Response
Transmitter Related Expenses	Do you have transmitter related expenses?	Yes

### Primary Transmitter

### **Existing Transmitter Information**

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter	Manufacturer	
Manufacturer and Type	Model	AT72K7
	Year	2009
	Туре	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	2.7 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?	No
	Manufacturer	
	Model	EC702-HP- BB
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1.7 kW
	Justification for New Transmitter	Manufacturer has discontinued this model of transmitter and will not support the rechanneling of it.

### Primary Transmitter

### **Other Transmitter Costs**

Question	Response
Service Entrance (3 phases 800A 208V)	No
Switchgear (industrial 800 amp)	No
Transformer (480V)	No
Power	N/A
Rigid Conduit and Wiring	No
Size	N/A
	Service Entrance (3 phases 800A 208V)  Switchgear (industrial 800 amp)  Transformer (480V)  Power  Rigid Conduit and Wiring

	Length	N/A
	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

Primary Transmitted Other Transmitter Cost Not Listed

Transmitter Information not provided.

### **Antennas**

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

### **Existing Antenna Information**

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna	Class	Class A
Manufacturer and Type	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)	15.0 kW

Manufacturer	
Model	AL8-16-PL
Year	2009

### **New Antenna Costs**

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna	Class	Class A
Manufacturer and Types	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	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)	15.0 kW
	Manufacturer	
	Model	AL6-26-PL

Year	2017
Justification for New Antenna	Existing antenna cannot be re-tuned to new channel

### **Other Antenna Costs**

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	
	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?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
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

**Other Antenna Cost Not Listed** 

Information not provided.

Transmission	effien	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)
	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?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure	Do you have a tower registration number?	Yes
Registration	ASR Number	1255743
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	32° 27' 59.8" N-
	Longitude (NAD83)	085° 03' 21.7" W-

Overall Structure Height	337.92 feet
Support Structure Height	337.92 feet
Ground Elevation Above Mean Sea Level (AMSL)	623.35 feet
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	PMB Broadcasting, LLC
Date Constructed	01/01/1960

### 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	N/A
Helicopter Services Required	Are helicopter services required?	No

### Primary Tower

### Other Tower Expenses Not Listed

Information not provided.

### Outside Professional

Section	Question	Response
I Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	605
	Explanation	Project management (Invoice processing, progress reporting, daisy chain monitoring and analysis, program management, and site visits as required)
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	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 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	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	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	No
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside
Outside
Professional Services Expenses Not Listed
Professional Services © ostsided.

## 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	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?	Yes
	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?	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 EC702-HP- BB	\$126,000.00	\$104,848.00		\$104,477.93	
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$104,848.00	N/A	\$104,477.93	N/A
Sub-total	\$126,000.00	\$104,848.00	N/A	\$104,477.93	N/A
Total for all systems	\$387,330.00	\$349,726.00	N/A	\$162,089.73	N/A

### Components

File Name	
Component Description: Amount:	TRANSMITTER, UHF DOHERTY BROADBAND \$39,412.57
Component Description:  Amount:	TRANSMITTER, UHF DOHERTY BROADBAND \$59,435.00
Component Description:  Amount:	TRANSMITTER, UHF DOHERTY BROADBAND \$5,630.36
	Component Description:  Amount:  Component Description:  Amount:  Component Description:

## 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 AL6-26-PL	\$33,030.00	\$31,400.00		\$0.00	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - Lower Power Side Mount, Class A One Station antenna basic	\$26,300.00	\$25,000.00	N/A	\$0.00	N/A
Sub-total	\$33,030.00	\$31,400.00	N/A	\$0.00	N/A
Total for all systems	\$387,330.00	\$349,726.00	N/A	\$162,089.73	N/A

### Components

Information not provided.

### Cost

#### **Transmission Line**

**Information** 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	\$84,200.00	\$80,000.00		\$0.00	
Short Tower (less than 500')	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Sub-total	\$84,200.00	\$80,000.00	N/A	\$0.00	N/A
Total for all systems	\$387,330.00	\$349,726.00	N/A	\$162,089.73	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	\$122,150.00	\$112,078.00		\$54,286.80	
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	\$312.50	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$600.00	N/A
Project management of the transition	\$95,590.00	\$90,750.00	N/A	\$50,668.30	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$78.00	Please see attached WYBU Justification Outside Professional Services - Attorney - Other Matters	\$78.00	N/A

Attornov Food	<b>#0.005.00</b>				
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	\$628.00	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Sub-total	\$122,150.00	\$112,078.00	N/A	\$54,286.80	N/A
Total for all systems	\$387,330.00	\$349,726.00	N/A	\$162,089.73	N/A

### Components

Actual Information Description	File Name	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description:	Preparation of the engineering section of FCC
	Amount:	Form 2100. \$2,000.00

Perform engineering study for new channel assignment and antenna development	Component Description:	Engineering study work for new channel assignment and antenna
	Amount:	development. \$312.50
Prepare and or review reimbursement form		
reimbursement form	Component Description:	Draft Form 399 on LMS.
	Amount:	\$80.00
	Component Description:	Final review,
		revision of initial Form 399
	Amount:	\$520.00
Project management of the		
transition	Component Description:	Project
	Amount:	Management \$2,246.60
	Component Description:	Project
	Amount:	Management \$2,394.25
	Component Description:	Project
		Management
	Amount:	\$1,231.60
	Component Description:	Project
	Amount:	Management \$1,779.70
	Component Description:	Project
		Management
	Amount:	\$2,113.00

**Component Description:** 

Amount:

Project

Management \$1,647.05

**Component Description:** 

Project

Amount:

Management \$3,808.95

**Component Description:** 

Project

Management

Amount:

\$2,126.65

**Component Description:** 

Project

**Amount:** 

Management \$2,431.55

**Component Description:** 

Project

Amount:

Management \$1,870.15

**Component Description:** 

Project

**Amount:** 

Management \$1,803.40

**Component Description:** 

Project

Amount:

Management

\$2,301.40

**Component Description:** 

Project

Amount:

Management \$1,973.00

**Component Description:** 

Project

Amount:

Management

\$3,528.75

**Component Description:** 

Project Management

Amount:

\$1,470.85

**Component Description:** 

Project

Amount:

Management \$91.50

**Component Description:** 

Project

Amount:

Management \$1,505.60

**Component Description:** 

Project

**Amount:** 

Management \$1,607.40

**Component Description:** 

Project

Amount:

Management

\$1,594.55

**Component Description:** 

Project

Amount:

Amount:

Amount:

Amount:

Management \$1,660.70

**Component Description:** 

Project

Management

\$1,575.90

**Component Description:** 

Project

Management

\$1,682.70

**Component Description:** 

Project

Management

\$2,655.05

**Component Description:** 

Project

Amount:

Management \$1,120.70

**Component Description:** 

Project

Amount:

Management

\$1,023.10

**Component Description:** 

Project

**Amount:** 

Management \$1,916.10

**Component Description:** 

Project

**Amount:** 

Amount:

Management

\$1,508.10

Attorney Fees - Negotiation of lease and other matters for shared locations

**Component Description:** 

Review FCC email

directing bank

account association

\$78.00

Information not provided.

Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application Attorney Fees - Prepare and File FCC Form 2100 **Component Description:** Load and prepare (main), Construction Permit initial draft Form Application 2100 \$80.00 Amount: **Component Description:** WYBU-550-Attorney -Construction Permit Application (Main) \$80.00 Amount: **Component Description:** Review, modify and finalize Form 2100 CP application **Amount:** \$468.00 Prepare engineering section Information not provided. of FCC Form 2100 (main), License to Cover Application

## **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	\$21,950.00	\$21,400.00		\$3,325.00	
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$2,125.00	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$1,500.00	\$1,500.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$7,000.00	\$7,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$400.00	\$400.00	N/A	N/A	N/A
MVPD Notification of Channel Change	\$1,500.00	\$1,500.00	N/A	\$1,200.00	N/A
Sub-total	\$21,950.00	\$21,400.00	N/A	\$3,325.00	N/A
Total for all systems	\$387,330.00	\$349,726.00	N/A	\$162,089.73	N/A

### Components

<b>Actual Information</b>		
Description	File Name	

DTV Medical Facility Notification	Component Description: Amount:	Mailing \$2,125.00
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.	
Equipment Delivery and Handling Charges	Information not provided.	
Develop and air announcement of upcoming channel change	Information not provided.	
MVPD Notification of Channel Change	Component Description:	Prepare letters to MVPDs
	Amount:	\$1,200.00

## Cost Information

### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$387,330.00	\$349,726.00	\$162,089.73

Reimbursem	envestiarus	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

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.
- 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.

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.

### CHRIS L MAVROS

D.E., Christian Television Network

07/25/2020

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.
- 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.

### CHRIS L MAVROS

D.E., Christian Television Network

07/25/2020

Section Question Response

### Submission of Final Allocation or Accounting Information 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 and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. The abovenamed 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 abovenamed applicant for the Authorization(s) specified above.

### CHRIS L MAVROS

D.E., Christian Television Network

07/25/2020

### **Attachments**