



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **24582** | Service: **DTV** | Call **WHLV-TV** | Channel: **32 (UHF)** |
ID:
File **0000027962**
Number:
FRN: **0004346060** | Date **08/24**
Submitted: **/2021**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
TRINITY BROADCASTING OF TEXAS, INC.	13600 Heritage Parkway	+1 (855) 826-2255	CMMAY@MAYLAWOFFICES.COM	Not-for-Profit
Doing Business As:	Suite 200 Fort Worth, TX 76177			
TRINITY BROADCASTING NETWORKS	United States			

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
The Preparer is same as the reimbursement contact.			

**Broadcaster
Information
and
Transition
Plan**

Question		Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.		Yes
Briefly describe transition plan		Reduce TPO to 50% and remove 1/2 of the xmitter system. Install new SS xmitter system. Add AUX antenna & line to the tower & feed it with a reduced signal from the current xmitter. Remove & replace antenna. Test.

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 and Type	Manufacturer	
	Model	Sigma
	Year	2005
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	50 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	HPTV- PRLX-U18
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	30 kW
	Justification for New Transmitter	Harris no longer supports the Sigma. see attached

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Electrical Service	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
	Length	N/A
	Other Electrical Service	Yes

	Description	breakers, labor
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Type	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 leasehold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

Primary Transmitter

Other Transmitter Cost Not Listed

Name	Description
install	xmitter installation

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	Retune Existing
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Owner	American Tower
	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 Manufacturer and Type	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	4
	Number of Panels	12
	Design power capacity in use	80.0 %

Lower Limit	470.00 MHz
Upper Limit	800.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	1000.0 kW
Manufacturer	Dielectric
Model	TUD-C5SP-16/56H-2-B
Year	2000

Primary Antenna

Adjustment to Existing Antenna

Section	Question	Response
Sweep Test of Existing Antenna	Do you need a sweep test of existing antenna?	Yes

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	Yes
	Type	Additional Module
	Number of channels supported	1
	Frequencies of channels supported	RF channel
	Frequency	N/A

Enter a list of RF channel numbers.

RF Channel Number

32

Primary
Antenna

Other Antenna Cost Not Listed

Name	Description
combiner install	Combiner install

Interim
Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	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 Manufacturer and Type	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	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)	240.0 kW

Manufacturer	
Model	TFU-24WB
Year	2017
Justification for New Antenna	REMAIN ON THE AIR DURING TESTING

Interim Antenna

Other Antenna Costs

Section	Question	Response
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 an 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

Interim Antenna

Other Antenna Cost Not Listed

Name	Description
Combiner Install	Combiner Install

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)
	Description of Use	N/A
	Ownership	Leased
	Owner	American Tower
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	Rigid
	Diameter	7 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1000 feet per run

Primary
Transmission Line

New Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1000 feet per run
	Justification for New Transmission Line	required

Primary
Transmission Line

Other Transmission Line Expenses Not Listed

Information not provided.

Interim
Transmission Line

New Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Rigid
	Diameter	8 3/16 inches
	Segment Length	Broadband
	Other Segment Length	
	Number of parallel runs	1
	Length	1000 feet per run
	Justification for New Transmission Line	remains on the air during testing

Interim
Transmission Line

Other Transmission Line Expenses Not Listed

Name	Description
FIELD CUT	field cut

**Tower
Equipment
And
Rigging
Costs**

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	No

**Outside
Professional Services Costs**

Section	Question	Response
Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	10
	Explanation	American Tower
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	3
	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	Yes
	Quantity	3
	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	No
	Number of Days	N/A
	Justification	N/A

Outside Professional Services Costs **Other Professional Services Expenses Not Listed**

If wireless is not provided.

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	Yes
	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?	No
	Does this relocation require MVPD Notification of a Channel Change?	No

**Other
Expenses**

Other Expenses Not Listed

Name	Description
Core drilling	Core drill a hole for coax

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 HPTV- PRLX-U18	\$1,032,000.00	\$978,005.00		\$834,977.58	
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$893,005.00	N/A	\$781,901.00	N/A
Other Electrical Service: breakers, labor	\$50,000.00	\$50,000.00	quoted	\$18,076.58	N/A
install	\$35,000.00	\$35,000.00	quoted installation	\$35,000.00	N/A
Sub-total	\$1,032,000.00	\$978,005.00	N/A	\$834,977.58	N/A
Total for all systems	\$2,359,360.00	\$1,293,419.00	N/A	\$1,040,242.74	N/A

Components

Actual Information	
Description	File Name

UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	<table><tr><td data-bbox="707 98 1085 280">Component Description:</td><td data-bbox="1085 98 1431 280">35% deposit, 30% 60 days and 30% prior to shipping</td></tr><tr><td data-bbox="707 280 1085 369">Amount:</td><td data-bbox="1085 280 1431 369">\$742,805.95</td></tr><tr><td data-bbox="707 369 1085 566">Component Description:</td><td data-bbox="1085 369 1431 566">5% proof</td></tr><tr><td data-bbox="707 566 1085 566">Amount:</td><td data-bbox="1085 566 1431 566">\$39,095.05</td></tr></table>	Component Description:	35% deposit, 30% 60 days and 30% prior to shipping	Amount:	\$742,805.95	Component Description:	5% proof	Amount:	\$39,095.05
Component Description:	35% deposit, 30% 60 days and 30% prior to shipping								
Amount:	\$742,805.95								
Component Description:	5% proof								
Amount:	\$39,095.05								
Other Electrical Service: breakers, labor	<table><tr><td data-bbox="707 566 1085 683">Component Description:</td><td data-bbox="1085 566 1431 683">xmitter electric</td></tr><tr><td data-bbox="707 683 1085 779">Amount:</td><td data-bbox="1085 683 1431 779">\$18,076.58</td></tr></table>	Component Description:	xmitter electric	Amount:	\$18,076.58				
Component Description:	xmitter electric								
Amount:	\$18,076.58								
install	<table><tr><td data-bbox="707 779 1085 896">Component Description:</td><td data-bbox="1085 779 1431 896">xmitter install</td></tr><tr><td data-bbox="707 896 1085 996">Amount:</td><td data-bbox="1085 896 1431 996">\$35,000.00</td></tr></table>	Component Description:	xmitter install	Amount:	\$35,000.00				
Component Description:	xmitter install								
Amount:	\$35,000.00								

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
Interim Antenna TFU-24WB	\$262,880.00	\$77,700.00		\$49,733.51	
Combiner Install	<i>\$6,000.00</i>	\$6,000.00	N/A	\$3,975.00	Placeholder - FCC IT Technical Support
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$15,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,700.00	N/A	N/A	N/A
UHF - Lower Power Side Mount, One station antenna -- 200-500 kW, elliptically or circularly polarized	\$227,000.00	\$50,000.00	N/A	\$45,758.51	N/A

Primary Antenna TUD-C5SP-16/56H-2-B	\$113,230.00	\$105,500.00		\$74,126.89	
combiner install	\$10,000.00	\$10,000.00	N/A	\$1,987.50	N/A
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$4,000.00	N/A	N/A	N/A
Adding a module to existing combiner (without antenna)	\$84,200.00	\$84,000.00	N/A	\$64,639.39	N/A
Sweep test of existing antenna	\$6,730.00	\$7,500.00	quoted	\$7,500.00	N/A
Sub-total	\$376,110.00	\$183,200.00	N/A	\$123,860.40	N/A
Total for all systems	\$2,359,360.00	\$1,293,419.00	N/A	\$1,040,242.74	N/A

Components

Actual Information	
Description	File Name

Combiner Install	Component Description: combiner Amount: \$3,975.00
	Component Description: Combiner install cap 1 Amount: \$1,987.50
Side mount brackets for high power antennas (if not included in antenna base cost)	Information not provided.
Sweep test of existing antenna	Information not provided.
UHF - Lower Power Side Mount, One station antenna -- 200-500 kW, elliptically or circularly polarized	Component Description: antenna cap3 plus tax Amount: \$16,925.01
	Component Description: aux antenna Amount: \$28,833.50
combiner install	Component Description: combiner install cap 3 Amount: \$1,987.50
	Component Description: combiner install Amount: N/A
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	Information not provided.

Adding a module to existing combiner (without antenna)	<div> Component Description: connect xmitter to combiner </div> <div> Amount: \$7,069.48 </div>
	<div> Component Description: combiner cap3 </div> <div> Amount: \$12,500.00 </div>
	<div> Component Description: combiner connection </div> <div> Amount: \$7,145.27 </div>
	<div> Component Description: connect xmitter to combiner </div> <div> Amount: \$9,220.18 </div>
	<div> Component Description: connect xmitter to combiner </div> <div> Amount: \$3,704.46 </div>
	<div> Component Description: combiner </div> <div> Amount: \$25,000.00 </div>
Sweep test of existing antenna	<div> Component Description: sweep cap 3 </div> <div> Amount: \$2,500.00 </div>
	<div> Component Description: second sweep </div> <div> Amount: \$5,000.00 </div>

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
Interim Transmission Line	\$404,000.00	\$45,000.00		\$27,450.00	
FIELD CUT	<i>\$5,000.00</i>	\$5,000.00	N/A	\$0.00	N/A
Rigid Transmission Line - copper, 8 3 /16" broadband	\$399,000.00	\$40,000.00	N/A	\$27,450.00	N/A
Primary Transmission Line	\$399,000.00	\$0.00		\$0.00	
Rigid Transmission Line - copper, 8 3 /16" broadband	\$399,000.00	\$0.00	N/A	N/A	N/A
Sub-total	\$803,000.00	\$45,000.00	N/A	\$27,450.00	N/A
Total for all systems	\$2,359,360.00	\$1,293,419.00	N/A	\$1,040,242.74	N/A

Components

Actual Information	
Description	File Name
FIELD CUT	Information not provided.

Rigid Transmission Line - copper, 8 3/16" broadband	<div> <div> Component Description: Amount: </div> <div> Aux line cap 3 \$9,150.00 </div> </div> <div> <div> Component Description: Amount: </div> <div> line \$18,300.00 </div> </div>
Rigid Transmission Line - copper, 8 3/16" broadband	Information not provided.

Cost Information

Tower Equipment and Rigging Costs

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	\$127,950.00	\$73,250.00		\$44,632.00	
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$40,000.00	N/A	\$37,732.00	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$11,040.00	\$7,000.00	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

Prepare request for Special Temporary Authorization	\$6,150.00	\$3,000.00	N/A	\$1,750.00	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	\$750.00	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
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$4,400.00	N/A
Sub-total	\$127,950.00	\$73,250.00	N/A	\$44,632.00	N/A

Total for all systems	\$2,359,360.00	\$1,293,419.00	N/A	\$1,040,242.74	N/A
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Components

Actual Information	
Description	File Name
Comprehensive coverage verification via field study, if needed	Component Description: study Amount: \$37,732.00
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.
Prepare request for Special Temporary Authorization	Component Description: sta Amount: \$1,750.00
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Component Description: license Amount: \$750.00
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	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.

Project management of the transition	Information not provided.	
Perform engineering study for new channel assignment and antenna development	Component Description: Amount:	engineering cap 3 \$1,250.00
	Component Description: Amount:	interference \$650.00
	Component Description: Amount:	eng \$2,500.00

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	\$20,300.00	\$13,964.00		\$9,322.76	
Core drilling	<i>\$1,000.00</i>	\$1,000.00	quoted	\$800.00	N/A
Equipment Delivery and Handling Charges	<i>\$3,000.00</i>	\$3,000.00	foklift	\$1,601.63	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$4,000.00</i>	\$4,000.00	dispose of old transmitter	\$1,842.73	N/A
Non-zoning permits	<i>\$750.00</i>	\$750.00	American Tower	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$5,214.00	N/A	\$5,078.40	N/A
Sub-total	\$20,300.00	\$13,964.00	N/A	\$9,322.76	N/A
Total for all systems	\$2,359,360.00	\$1,293,419.00	N/A	\$1,040,242.74	N/A

Components

Actual Information	
Description	File Name

Core drilling	Component Description: Core Drill Amount: \$800.00
Equipment Delivery and Handling Charges	Component Description: forklift Amount: \$1,601.63
Disposal Costs (for equipment and other waste, net of any salvage value)	Component Description: oil disposal Amount: \$100.00 Component Description: dumpster Amount: \$31.79 Component Description: dumpster Amount: \$1,011.44 Component Description: dumpster Amount: \$699.50
Non-zoning permits	Information not provided.
DTV Medical Facility Notification	Component Description: med Amount: \$5,078.40

**Cost
Information**

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$2,359,360.00	\$1,293,419.00	\$1,040,242.74

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>Steve Hastings <i>Network RF Manager</i></p> <p>08/24/2021</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>Steve Hastings <i>Network RF Manager</i></p> <p>08/24/2021</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.

Steve Hastings
Network RF Manager

08/24/2021

Attachments