

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility ID:	10535	Service: DCA	Call Sign:	KPSP-CD	Channel: 18 (UHF)
File Number:	000002	26847	2.9.		
FRN: 000	01590330	Date Submitted:	01/08 /2019		

Applicant Name, Type, and Contact Information

Information

Applicant	Address	Phone	Email	Applicant Type
GULF-CALIFORNIA BROADCAST COMPANY Doing Business As: GULF- CALIFORNIA BROADCAST COMPANY	TIM HANNAN PO Box 64501 ST. JOSEPH, MO 64501 United States	+1 (816) 271- 8405	TIM. HANNAN@NPGCO. COM	Corporation

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		
	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.	No
	Briefly describe transition plan	The plan is for KPSP-CD is to replace the existing channel 38 system with a new channel 18 transmitter. They will move their tower location to share a broadcast antenna, combiner, transmission line, and tower with KESQ-TV, KDFX-CD, and KCWQ-LD.

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

Primary	Existing Transmitter Information					
Fransmitter	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	DT834A			
		Year	2001			
		Туре	Solid State			
		Solid State Cooling	Air Cooled			
		Solid State Power Capacity	1 kW			

Existing Transmitter Information

Primary	New Transmitter Costs				
Transmitter	Section	Question	Response		
	New	Use	Primary (Main)		
	Transmitter	Change Type	Purchase New		
		Is this a request for upgraded equipment?	Νο		
		Manufacturer			
		Model	UAXTE-2R37		
		Transmitter Type	Solid State		
		Solid State Cooling	Air Cooled		
		Solid State Power capacity	1.4 kW		
		Justification for New Transmitter	SEE ATTACHED "RALEIGH-#349249-v1- KPSP- CD_Form_399_New_Transmitter_Justificati. pdf"		

Other Transmitter Costs Primary

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Transmitter	Section	Question	Response		
	Electrical Service	Service Entrance (3 phases 800A 208V)	Yes		
		Switchgear (industrial 800 amp)	No		
		Transformer (480V)	No		
		Power	N/A		
		Rigid Conduit and Wiring	Yes		
		Size	2 inches		
		Length	30.0 feet		
		Other Electrical Service	No		
		Description	N/A		
	HVAC Service	Does the replacement transmitter require HVAC Service?	No		
			,		

	Туре	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

Primary Other Transmitter Cost Not Listed

Transmitter Information not provided.

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

Primary	Existing Antenna Information					
Antenna	Section	Question	Response			
	Existing Antenna	Type of change	Lease New			
	Description	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?	Yes			
	Existing Antenna	Class	Class A			
	Manufacturer and Type	Mounting	Side Mount			
		Antenna position in stack	Not in Stack			
		Polarization	Horizontal			
		Туре	Other			
		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	PARPANEL			
		ERP: (Effective Radiated Power)	9.0 kW			
		Manufacturer				

Model	4DR-8S
 Year	1998

Primary	New Antenna Costs			
Antenna	Section	Question	Response	
	New Antenna Description	Use	Primary (Main)	
		Description of Use	N/A	
		Change Type	Lease New	
		Is this a request for upgraded equipment?	Yes	
		Ownership	Leased	
		Owner	KESQ-TV	
		Is antenna shared?	Yes	
		Is antenna directional?	Yes	
		Will antenna be located on or in close proximity to an antenna farm?	Yes	
	New Antenna	Class	Full Power	
	Manufacturer and Types	Mounting	Side Mount	
		Antenna position in stack	Not in Stack	
		Polarization	Elliptical	
		Туре	Broadband Panel	
		Number of Stations Supported	4	
		Number of Panels/Bays	8	
		Lower Limit	470.00 MHz	
		Upper Limit	700.00 MHz	
		Design power capacity in use	5.5 %	
		Other Antenna Type	N/A	
		ERP: (Effective Radiated Power)	15.0 kW	
		Manufacturer		
		Model	SBB-E- 8C170	

Year
Justification for New Antenna

Primary Antenna	Other Antenna Costs			
	Section	Question	Response	
	Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	Yes	
		Туре	New	
		Number of channels supported	4	
		Frequencies of channels supported	RF channel	
		Frequency	N/A	
		Do you need a combiner output splitter /switcher for dual feed lines?	No	
	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?	No	

Enter a list of RF channel numbers.

RF Channel Number		
33		
18		
20		
28		

Primary Other Antenna Cost Not Listed

Antenna Information not provided.

Interim	New Antenna Costs		
Antenna	Section	Question	Response
	New Antenna Description	Use	Interim
		Description of Use	N/A
		Change Type	Lease New
		Ownership	Owned
		Owner	N/A
		Is antenna shared?	No
		Is antenna directional?	No
		Will antenna be located on or in close proximity to an antenna farm?	No
	New Antenna	Class	Class A
	Manufacturer and Type	Mounting	Side Mount
		Antenna position in stack	Not in Stack
		Polarization	Horizontal
		Туре	Broadband Panel
		Number of Stations Supported	1
		Number of Panels/Bays	1
		Lower Limit	0.001 MHz
		Upper Limit	0.001 MHz
		Design power capacity in use	0.0 %
		Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	0.001 kW	
		Manufacturer	
		Model	N/A
		Year	2018

Interim Other Antenna Costs

Antenna

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?	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

Interim Other Antenna Cost Not Listed

Antenna Information not provided.

Transmission Seffien	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	No

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

Add Tower

Add Tower		
Response		
Modify Existing		
Primary (Main)		
N/A		
Leased		
No		
No		
N/A		
N/A		
Unknown		
No		
Yes		
1220472		
33° 51' 58.1" N-		
116° 26' 05.0" W-		

Overall Structure Height	88.91 feet
Support Structure Height	60.04 feet
Ground Elevation Above M (AMSL)	lean Sea Level 1555.10 feet
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Gulf- California Broadcast Co
Date Constructed	09/23/1968

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

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lower	
Iower	

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

Other Tower Expenses Not Listed Primary

Tower Information not provided.

Primary	Existing Tower				
Tower	Section	Question	Response		
	Existing Tower Description	Type of change	Move Equipment		
		Tower Use	Primary (Main)		
		Description of Use	N/A		
		Ownership	Leased		
		Is this tower consider Complex?	No		
		Is this tower currently shared with any other stations?	No		
		One or more FM, AM or TV radio broadcaster(s)	N/A		
		Others Types of Users	N/A		
		Is tower documented for structural analysis?	Yes		
		Is tower compliant with Rev G?	No		
	Existing Tower Structure Registration	Do you have a tower registration number?	No		
		ASR Number			
-	Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	33° 51' 01.0" N-		
		Longitude (NAD83)	116° 26' 01.0" W-		
		Overall Structure Height	117.90 feet		
		Support Structure Height	117.90 feet		
		Ground Elevation Above Mean Sea Level (AMSL)	1536.00 feet		
		Structure Type	LTOWER - Lattice Tower		
		Tower Owner	Inside Tower		
		Date Constructed	11/01/1979		

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

Other Tower Expenses Not Listed

Primary Tower Information not provided.

Outside Professional	Section	Question	Response
	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	595
		Explanation	Please see the attached quote from Widelity
	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	1
		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	1
	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	No
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Other Professional Services Expenses Not Listed

Professional Services Costs	Description
Additional Repack Legal Service	s Not NON-CATALOG LEGAL SERVICES SUCH
Otherwise Specified in Form 399	AS REVIEW OF QUARTERLY
	TRANSITION STATUS REPORTS AND
	OTHER MISCELLANEOUS NON-
	CATALOG LEGAL FEES.

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	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
		Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
		Does this relocation require MVPD Notification of a Channel Change?	No

Other Expenses Not Listed

Expenses Information not provided.

Transmitters

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmitter UAXTE-2R37	\$141,180.00	\$93,007.80		\$28,463.28	
2" Rigid Conduit and Wiring (Cost per foot)	\$780.00	\$750.00	N/A	N/A	N/A
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$9,800.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$82,457.80	N/A	\$28,463.28	N/A
Sub-total	\$141,180.00	\$93,007.80	N/A	\$28,463.28	N/A
Total for all systems	\$591,440.00	\$345,994.37	N/A	\$49,457.64	N/A

Components

Actual Information Description	File Name
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.
Service entrance 3 phase /800 amp/208 volt	Information not provided.

UHF - Air Cooled Solid State		
Transmitter 1 - 2.5 kW	Component Description:	UAXTE-4 Transmitter
	Amount:	\$14,231.64
	Component Description:	UAXTE-4
		Transmitter
	Amount:	\$14,231.64

Antennas

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Interim Antenna N/A	\$27,560.00	\$0.00		\$0.00	
UHF – Broadband Panel, Side Mount Auxiliary /Interim, 0 horizontally polarized	\$0.00	\$0.00	PHANTOM ANTENNA	N/A	N/A
UHF - Lower Power Side Mount, Class A broadband panel (cost per panel)	\$1,260.00	\$0.00	INTERIM ANTENNA NO LONGER NEEDED	N/A	N/A
UHF - Lower Power Side Mount, Class A One Station antenna basic	\$26,300.00	\$0.00	INTERIM ANTENNA NO LONGER NEEDED	N/A	N/A
Primary Antenna SBB- E-8C170	\$84,200.00	\$14,396.57		\$0.00	
New combiner, cost per channel (without antenna)	\$84,200.00	\$14,396.57	22.5% of the combiner cost. Please see attached narrative for details.	N/A	N/A

UHF - High Power, Side Mount, broadband panel, 8 bay,, 15 kW input, directional,, elliptically or circularly polarized	\$0.00	\$0.00	Associated cost recorded under KESQ-TV - KPSP-CD will use this antenna, owned by KESQ-TV, at a cost of \$0. Please see attached narrative for details.	N/A	N/A
Sub-total	\$111,760.00	\$14,396.57	N/A	\$0.00	N/A
Total for all systems	\$591,440.00	\$345,994.37	N/A	\$49,457.64	N/A

Components

Information not provided.

Cost Transmission Line

Information Information not provided.

Tower Equipment and Rigging Costs

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower LTOWER	\$84,200.00	\$81,900.00		\$0.00	
Short Tower (less than 500')	\$84,200.00	\$81,900.00	N/A	N/A	N/A
Primary Tower TOWER	\$84,200.00	\$0.00		\$0.00	
Short Tower (less than 500')	\$84,200.00	\$0.00	Cost to be paid by KESQ-TV. Please see attached narrative for details.	N/A	N/A
Sub-total	\$168,400.00	\$81,900.00	N/A	\$0.00	N/A
Total for all systems	\$591,440.00	\$345,994.37	N/A	\$49,457.64	N/A

Components

Information not provided.

Outside Professional Services

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$150,770.00	\$146,925.00		\$20,994.36	
Additional Repack Legal Services Not Otherwise Specified in Form 399	\$5,000.00	\$5,000.00	N/A	\$2,129.20	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	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	\$4,677.66	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$1,000.00	N/A	\$1,000.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$2,000.00	N/A	\$687.50	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$94,010.00	\$99,675.00	Please see the attached quote from Widelity.	\$12,500.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$20,500.00	N/A	N/A	N/A

Total for all	\$591,440.00	\$345,994.37	N/A	\$49,457.64	N/A
systems					

Components

File Name	
Component Description: Amount:	Non-Catalog Legal Services such as review of quarterly transition status reports and other miscellaneous non- catalog legal fees. \$37.12
Component Description: Amount:	Non-Catalog Legal Services such as review of quarterly transition status reports and other miscellaneous non- catalog legal fees. \$649.60
Component Description: Amount:	Repack Legal Services \$324.80
Component Description: Amount:	Telephone Conference with Jim DeChant \$46.40
Component Description: Amount:	Repack Legal Services \$151.90
	Component Description: Amount: Component Description: Amount: Component Description: Amount: Component Description:

	Component Description: Amount:	Repack Legal Services \$706.10
	Component Description: Amount:	Repack Legal Services \$157.60
	Component Description: Amount:	Repack Legal Services \$27.84
	Component Description: Amount:	Repack Legal Services \$27.84
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	Component Description: Amount:	KPSP Charges related to CP. \$2,386.30
	Component Description:	General Filing and associated costs 2017 see "Repack Invoice Memo"
	Amount:	\$2,291.36
Prepare request for Special	Information not provided.	

Prepare engineering		
section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	Engineering study work for new channel assignment and antenna development. \$1,000.00
Perform engineering study for new channel assignment and antenna development	Component Description:	Engineering study work for new channel assignment and antenna development.
	Amount:	\$62.50
	Component Description:	Professional Services
	Amount:	\$250.00
	Component Description:	Engineering study work for new channel assignment and
	Amount:	antenna development. \$375.00
Address transition timing	Information not provided.	

Project management of the transition	Component Description: Amount:	Project Management \$1,579.80
	Component Description: Amount:	Project Management \$3,275.40
	Component Description: Amount:	Cost Reconciliation \$5,356.20
	Component Description: Amount:	Project Management \$1,037.80
	Component Description: Amount:	Project Management \$1,250.80
Prepare and or review reimbursement form	Information not provided.	
RF Exposure Measurements	Information not provided.	

Other Expenses

Cost Information

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

	Predetermined	Estimated	Estimated Cost	Actual	Actual Cc
Description	Cost Estimate	Cost	Justification	Cost	Justificat
Other Expenses	\$19,330.00	\$9,765.00		\$0.00	
Develop and air announcement of upcoming channel change	\$750.00	\$750.00	PRODUCTION COSTS NECESSARY ADVERTISING ANNOUNCEMENTS	N/A	N/A
Equipment Storage	\$2,500.00	\$2,500.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$1,500.00	\$1,500.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$2,500.00	\$2,500.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$2,000.00	N/A	N/A	N/A
Sub-total	\$19,330.00	\$9,765.00	N/A	\$0.00	N/A

Total for all	\$591,440.00	\$345,994.37	N/A	\$49,457.64	N/A
systems					

Components

Information not provided.

Grand Total			
	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$591,440.00	\$345,994.37	\$49,457.64
		Predetermined Cost Estimate	Predetermined Cost Estimate Estimated Cost

Reimbursem	entestiatus	Response
	The facility has ceased operating on its pre- auction channel.	No
	Construction of final facilities or all necessary modifications are complete.	No
	All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator.	No

Certification	Section	Question	Response
	Submission of Estimated Expenses Statements	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.	
		 The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. The above-named 	
		entity acknowledges that all certifications and attached documentation are considered material representations.	
		3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.	

- 4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
- 7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.	
I declare, under penalty of perjury, that I am an authorized representative of the above- named applicant for the Authorization(s) specified above.	James W. DeChant VP of Technology
	01/08/2019

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).	
		 The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 	
		2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.	
		3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.	

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

	The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission. 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	
an au	requested. are, under penalty of perjury, that I am thorized representative of the above- d applicant for the Authorization(s)	James W. DeChant VP of
specif	ïed above.	Technology 01/08/2019

Attachments