

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

36717 Service: **DCA** Call Channel: 26 (UHF) Facility KSKJ-CD Sign:

Number:

ID:

File

FRN: 0026907345 Date 06/10

0000027925

Submitted: /2019

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
HC2 STATION GROUP, INC.	RENEE ILHARDT 450 PARK AVENUE 30TH FLOOR NEW YORK, NY 10022 United States	+1 (954) 606- 5486	RILHARDT@HC2BROADCASTING. COM	Limited Liability Company

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	Station plans to replace the filters, and retune the transmitter if possible.

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	ADT-1000
	Year	2007
	Туре	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	.35 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?	Yes
	Manufacturer	
	Model	TRN-5X-U- 18-C
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	3 kW
	Justification for New Transmitter	The current transmitter cannot be retuned.

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	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 Transmitter

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?	No
	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	Circular
	Туре	Broadband Panel
	Number of Stations Supported	1
	Number of Panels	2
	Design power capacity in use	100.0 %
	Lower Limit	548.00 MHz
	Upper Limit	554.00 MHz
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	1.0 kW

Manufacturer	
Model	4DR-8S
Year	2004

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?	Yes
	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 Types	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	Туре	Broadband Panel
	Number of Stations Supported	1
	Number of Panels/Bays	2
	Lower Limit	548.00 MHz
	Upper Limit	554.00 MHz
	Design power capacity in use	100.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	1.0 kW
	Manufacturer	
	Model	UTVC-01/X
	Year	2019

Justification for New Antenna	Station's
	repack was
	for new
	location in Mt
	Harvard.
	Equipment at
	original site at
	Granada Hills
	CA was not
	worth
	salvaging to
	move due to
	being
	discontinued
	by the
	manufacturer
	due to age
	/supportability.

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
	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 ^{Seffien}	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

Primary Transmission Se

Existing Transmission Line

n Line Section	Question	Response
Existing Transmission Line Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission	Manufacturer	
Line Manufacturer and Type	Туре	Flexible Air
	Diameter	1 5/8 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	150 feet per run

New Transmission Line

Primary

Transmission Line Question Response **New Transmission Line** Use Primary (Main) Costs N/A Description of Use Change Type Purchase New Is this a request for upgraded equipment? Yes Type Flexible Foam Diameter 1 5/8 inches Other Diameter N/A Segment Length N/A Other Segment Length N/A Number of parallel runs 1 220 feet per Length run Justification for New Transmission Line Station's repack was for new location in Mt Harvard. Equipment at original site at Granada Hills CA was not worth salvaging to move due to being discontinued by the manufacturer due to age /supportability.

Primary
Other Transmission Line Expenses Not Listed
Transmission of provided.

Tower Equipment And Rigging Costs

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

Primary Tower

Existing Tower

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	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?	No
	Is tower compliant with Rev G?	No
Existing Tower Structure	Do you have a tower registration number?	Yes
Registration	ASR Number	1013606
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	34° 17' 03.0 N-
	Longitude (NAD83)	118° 28' 20.0" W-
	Overall Structure Height	269.03 feet
	Support Structure Height	269.03 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1249.98 fee

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Liberman Broadcasting, Inc.
Date Constructed	01/01/1990

Primary Tower

Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for documented tower
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
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	260
	Explanation	Project management fee for the transition of one broadcaster for the tower and transmitter sub-projects. Scheduling and management of the timelines and schedules occurring during the repack.
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	Prepare and file Form FCC Construction Permit Application	Yes
Services	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	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	No
	Additional Field Engineering Service	No
	Number of Days	N/A

Justification	N/A

Outside Professional

Other Professional Services Expenses Not Listed

Services Costs	Description
Project management expenses	Travel, per diem, lodging for on site visits for project management

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	Yes
	FCC License to Cover Application	Yes
	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?	No
	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?	No

Other Expenses Not Listed

Expenses Information not provided.

Transmitters

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

Description Primary Transmitter TRN-5X-U- 18-C	Predetermined Cost Estimate \$36,750.00	Estimated Cost \$36,750.00	Estimated Cost Justification	Actual Cost \$36,750.00	Actual Cost Justification
UHF - Air Cooled Solid State Transmitter 3 kW	\$36,750.00	\$36,750.00	N/A	\$36,750.00	N/A
Sub-total	\$36,750.00	\$36,750.00	N/A	\$36,750.00	N/A
Total for all systems	\$256,281.00	\$235,832.99	N/A	\$118,123.45	N/A

Components

Actual Information Description	File Name	
UHF - Air Cooled Solid State Transmitter 3 kW	Component Description:	Transmitter cost, upgrade excluded. #7122-
	Amount:	01 \$36,750.00

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 UTVC-01/X	\$35,550.00	\$58,900.45		\$49,890.45	
UHF - Lower Power Side Mount, Class A One Station antenna basic	\$26,300.00	\$49,890.45	The total amount includes antenna, installation and shipping cost. See attached antenna quote from Kathrein.	\$49,890.45	N/A
Sweep test of existing antenna	\$6,730.00	\$6,550.00	N/A	N/A	N/A
UHF - Lower Power Side Mount, Class A broadband panel (cost per panel)	\$2,520.00	\$2,460.00	N/A	N/A	N/A
Sub-total	\$35,550.00	\$58,900.45	N/A	\$49,890.45	N/A
Total for all systems	\$256,281.00	\$235,832.99	N/A	\$118,123.45	N/A

Components

Actual Information		
Description	File Name	

UHF - Lower Power Side Mount, Class A One Station **Component Description:** Antenna shipping antenna -- basic cost. #35508747256 \$1,762.30 Amount: **Component Description:** Antenna cost 50% balance. #185462 Amount: \$9,827.40 **Component Description:** Antenna cost 50% down. #PO000047-INV Amount: \$9,540.75 **Component Description:** Installation 50% balance. #46485 Amount: \$14,380.00 **Component Description:** Installation 50% down. #46430 Amount: \$14,380.00 Sweep test of existing Information not provided. antenna UHF - Lower Power Side Information not provided. Mount, Class A broadband panel (cost per panel)

Transmission Line

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmission Line	\$5,280.00	\$3,864.00		\$3,864.00	
Flexible Foam Transmission Line - dielectric, 1 5 /8"	\$5,280.00	\$3,864.00	N/A	\$3,864.00	N/A
Sub-total	\$5,280.00	\$3,864.00	N/A	\$3,864.00	N/A
Total for all systems	\$256,281.00	\$235,832.99	N/A	\$118,123.45	N/A

Components

Actual Information Description	File Name	
Flexible Foam Transmission Line - dielectric, 1 5/8"	Component Description:	Transmission line cost. #185327
	Amount:	\$3,864.00

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	\$96,800.00	\$83,100.00		\$1,200.00	
Structural engineering tower load study for well documented tower	\$12,600.00	\$1,200.00	N/A	\$1,200.00	N/A
Short Tower (less than 500')	\$84,200.00	\$81,900.00	N/A	N/A	N/A
Sub-total	\$96,800.00	\$83,100.00	N/A	\$1,200.00	N/A
Total for all systems	\$256,281.00	\$235,832.99	N/A	\$118,123.45	N/A

Components

Actual Information Description	File Name	
Structural engineering tower load study for well documented tower	Component Description: Amount:	Tower analysis. #160125694 \$1,200.00
Short Tower (less than 500')	Information not provided.	

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	\$67,460.00	\$40,447.54		\$23,195.23	
Project management expenses	\$1,400.00	\$1,400.00	On-site expenses for project management	\$372.69	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	\$125.00	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	\$0.00	N/A

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$1,750.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$650.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$2,500.00	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	\$2,500.00	N/A
Project management of the transition	\$41,080.00	\$15,297.54	N/A	\$15,297.54	N/A
Sub-total	\$67,460.00	\$40,447.54	N/A	\$23,195.23	N/A
Total for all systems	\$256,281.00	\$235,832.99	N/A	\$118,123.45	N/A

Components

Actual Information	
Description	File Name

Project management expenses		
•	Component Description:	Trip Expenses Dallas to LA to
		gather info for
		repack project
		planning and 399
		estimate
		preparation.
	Amount:	\$372.69
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Attorney Fees - Prepare		
and File FCC Form 2100	Component Description:	Review of initial
(main), Construction Permit Application		post-auction
Fermit Application		baseline
		construction permit
	Amaunt	application
	Amount:	\$125.00
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare engineering		
section of FCC Form 2100	Component Description:	Prepare
(main), Construction	Component Boodinption.	engineering section
Permit Application		of initial post-
		auction baseline
		construction permit
		application
	Amount:	\$1,750.00

Perform engineering study for new channel assignment and antenna development	Component Description:	Perform engineering study for new channel assignment. Line item was \$850, but reducing reimb. request to \$650 to match fixed fee quote from vendor. We're absorbing the extra \$200 out
	Amount:	of pocket. \$650.00
Prepare and or review reimbursement form	Component Description:	Fee for preparation of 399 Reimbursement
	Amount:	Cost Estimates \$2,500.00
Address transition timing and coordination issues w/ other stations and wireless	Component Description: Amount:	Transition and coordination related cost. #160125695 \$2,500.00
Project management of the transition	Component Description:	Portion of general repack matter invoice attributable to this station -
	Amount:	divided by 15 stations. #1118 \$1,609.03

Component Description: Portion of general

repack matter invoice attributable to this station divided by 15 stations. #1112

Amount: \$521.40

Component Description: Portion of general

repack matter invoice attributable to this station divided by 10 stations. #473121

Amount: \$2,044.14

Component Description: Portion of general

repack matter invoice attributable to this station divided by 15 stations. #472568

Amount: \$985.76

Component Description: Portion of general

repack matter invoice attributable to this station divided by 15 stations. #472232

Amount: \$901.10

Component Description: Portion of general

repack matter invoice attributable to this station divided by 15 stations. #471659

Amount: \$1,206.00

Component Description: Portion of general

repack matter invoice attributable to this station divided by 10 stations. #1134

Amount: \$1,678.60

Component Description: Portion of general

repack matter invoice attributable to this station - divided by 10 stations. #1129

Amount: \$1,758.65

Component Description: Portion of general

repack matter invoice attributable to this station - divided by 10 stations. \$1122

Amount: \$1,979.10

Component Description: Portion of general

repack matter invoice attributable to this station divided by 15 stations. #1116

Amount: \$1,254.03

Component Description: Portion of general

repack matter invoice attributable to this station divided by 15 stations. #1096

Amount: \$714.93

Component Description: Portion of general

repack matter invoice attributable to this station divided by 15

stations. #1104

Amount: \$644.80

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	\$14,441.00	\$12,771.00		\$3,223.77	
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$0.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$1,777.77	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$1,446.00	\$1,446.00	N/A	\$1,446.00	N/A
Sub-total	\$14,441.00	\$12,771.00	N/A	\$3,223.77	N/A
Total for all systems	\$256,281.00	\$235,832.99	N/A	\$118,123.45	N/A

Components

Actual Information Description	File Name
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.

DTV Medical Facility Notification	Component Description:	Medical notification service. #INV- 001857
	Amount:	\$1,777.77
FCC Filing Fees - Form 2100 license to cover application	Information not provided.	
Develop and air announcement of	Component Description:	Announcement
upcoming channel change	Component Description.	cost. #6113921584
	Amount:	\$942.00
	Component Description:	Announcement
	Amount:	cost. #6113848997 \$504.00

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$256,281.00	\$235,832.99	\$118,123.45

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

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. Les Levi Chief Operating Officer

06/10/2019

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. Les Levi Chief Operating Officer

06/10/2019

Attachments