



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **31570** | Service: **DTV** | Call **WPAN** | Channel: **21 (UHF)** |  
ID: | Sign:  
File **0000028768**  
Number:  
FRN: **0019006501** | Date **07/09**  
Submitted: **/2019**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>B&amp;C COMMUNICATIONS, LLC</b>	William Smith, Manager 155 MIDDLE PLANTATION LANE GULF BREEZE, FL 32561 United States	+1 (716) 310- 3711	BILLSMEDIA@GMAIL. COM	Limited Liability Company

## 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
<b>Jeffrey L. Timmons , Esq. .</b> <i>FCC Counsel</i> <i>Jeffrey L. Timmons, Esq.</i>	Jeffrey L. Timmons, Esq. 974 Branford Lane NW Lilburn, GA 30047 United States	+1 (678) 463- 5116	jeff@timmonspc. 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	See attached Transition Plan Exhibit.

**Transmitters**

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

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	NV8604e
	Year	2008
	Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power Capacity	3.6 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	THU9 Doherty
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	9.2 kW
	Justification for New Transmitter	See attached Transition Plan Exhibit. Proposed 84 kw ERP operation on Ch. 31 requires at least 7 kw transmitter output power, current transmitter not capable of that.

**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
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	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**

Information not provided.

**Antennas**

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

## Primary Antenna

### Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	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 Manufacturer and Type	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	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	Broadband Slot
	ERP: (Effective Radiated Power) .....	33.5 kW

Manufacturer	
Model	CS-2030- 5771-14
Year	2008



Primary  
Antenna

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 Manufacturer and Types	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Slot
	Number of Stations Supported	1
	Number of Panels/Bays	10
	Lower Limit	572.00 MHz
	Upper Limit	578.00 MHz
	Design power capacity in use	50.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	84.0 kW
	Manufacturer	

Model	TFU-10DSC P230
Year	2017
Justification for New Antenna	See attached Transition Plan Exhibit.

## Primary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	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
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

Primary Antenna	Other Antenna Cost Not Listed
	Information not provided.

**Transmission Line**

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

**Primary  
Transmission Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	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
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	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
	Length	790 feet per run

**Primary** **New Transmission Line**  
**Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	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
	Length	475 feet per run
	Justification for New Transmission Line	See attached Transition Plan Exhibit.

**Primary** **Other Transmission Line Expenses Not Listed**  
**Transmission Line**

Information not 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	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?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	Yes
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1058824
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	30° 24' 13.4" N-
	Longitude (NAD83)	086° 59' 33.8" W-
	Overall Structure Height	712.92 feet
	Support Structure Height	663.38 feet
	Ground Elevation Above Mean Sea Level (AMSL)	36.09 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	Pinnacle Towers LLC
	Date Constructed	12/22/1986

**FM, AM or TV radio  
broadcasters. Facility ID's,  
Call Signs and Services of  
other broadcast stations with  
whom the tower is shared**

Facility ID	Call Sign	Service
66570	WUWF	FM

#### Other Types of Users

Users
WPXM811 Svc YE
WPXM764 Svc GE
WPWZ648 Svc YE
WPWY909 Svc YE
WQGJ974 Svc MG

#### 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 Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	No
	Number of Hours	N/A
	Explanation	N/A
<b>Outside RF consulting Engineering Services</b>	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
<b>Attorney and Other Outside Consulting Services</b>	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)	Yes
	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	Yes
<b>RF Field Engineering Services</b>	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 Services Costs**      **Other Professional Services Expenses Not Listed**

If wireless is not provided.

## Other Expenses

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	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?	No
<b>Permit and Filing Costs</b>	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
<b>Other Miscellaneous Expenses</b>	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?	Yes

<b>Other Expenses</b>	<b>Other Expenses Not Listed</b> Information not provided.
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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 THU9 Doherty	\$494,500.00	\$470,000.00		\$0.00	
UHF - Liquid Cooled Solid State Transmitter 8.2 - 13 kW	\$494,500.00	\$470,000.00	N/A	N/A	N/A
Sub-total	\$494,500.00	\$470,000.00	N/A	\$0.00	N/A
Total for all systems	\$846,520.00	\$804,750.00	N/A	\$17,475.00	N/A

Components

Information not provided.

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 TFU- 10DSC P230	\$96,130.00	\$91,400.00		\$0.00	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - Lower Power Side Mount, One station antenna - medium power (50- 200 kW), horizontally polarized	\$89,400.00	\$85,000.00	N/A	N/A	N/A
Sub-total	\$96,130.00	\$91,400.00	N/A	\$0.00	N/A
Total for all systems	\$846,520.00	\$804,750.00	N/A	\$17,475.00	N/A

Components

Information not provided.

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
Primary Transmission Line	\$11,400.00	\$10,925.00		\$0.00	
Flexible Foam Transmission Line - dielectric, 1 5 /8"	\$11,400.00	\$10,925.00	N/A	N/A	N/A
Sub-total	\$11,400.00	\$10,925.00	N/A	\$0.00	N/A
Total for all systems	\$846,520.00	\$804,750.00	N/A	\$17,475.00	N/A

Components

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	\$210,500.00	\$200,000.00		\$0.00	
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	\$0.00	N/A
Sub-total	\$210,500.00	\$200,000.00	N/A	\$0.00	N/A
Total for all systems	\$846,520.00	\$804,750.00	N/A	\$17,475.00	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
<b>Outside Professional Services</b>	<b>\$31,295.00</b>	<b>\$29,780.00</b>		<b>\$17,475.00</b>	
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	N/A	\$930.00	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
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$6,000.00	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$2,975.00	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
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$4,860.00	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
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$2,000.00	N/A	\$210.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,530.00	Jeffrey L. Timmons, Esq Invoice #02517	\$2,500.00	Only asking for reimbursement of the \$2500, but duplicate entry because adding required cover letter (can't delete or amend prior submission).
<b>Sub-total</b>	<b>\$31,295.00</b>	<b>\$29,780.00</b>	<b>N/A</b>	<b>\$17,475.00</b>	<b>N/A</b>

<b>Total for all systems</b>	\$846,520.00	\$804,750.00	N/A	\$17,475.00	N/A
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## Components

Actual Information	
Description	File Name
Attorney Fees - Negotiation of lease and other matters for shared locations	<div> <b>Component Description:</b> Calls with client and conference call with Widelity re: repack reimbursement issues  <b>Amount:</b> \$270.00 </div> <div> <b>Component Description:</b> Legal Services  <b>Amount:</b> \$660.00 </div>
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.
Perform engineering study for new channel assignment and antenna development	<div> <b>Component Description:</b> New Channel Assignment &amp; Antenna Development  <b>Amount:</b> \$2,400.00 </div> <div> <b>Component Description:</b> Alternate Channel Analysis  <b>Amount:</b> \$3,600.00 </div>

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<table> <tr> <td data-bbox="697 174 1007 210"><b>Component Description:</b></td><td data-bbox="1141 174 1316 244">CP Application Modification</td></tr> <tr> <td data-bbox="697 255 810 291"><b>Amount:</b></td><td data-bbox="1141 255 1260 291">\$1,240.00</td></tr> <tr> <td data-bbox="697 394 1007 430"><b>Component Description:</b></td><td data-bbox="1141 394 1374 506">FCC Form 2100 Construction Permit Application</td></tr> <tr> <td data-bbox="697 517 810 553"><b>Amount:</b></td><td data-bbox="1141 517 1260 553">\$1,735.00</td></tr> </table>	<b>Component Description:</b>	CP Application Modification	<b>Amount:</b>	\$1,240.00	<b>Component Description:</b>	FCC Form 2100 Construction Permit Application	<b>Amount:</b>	\$1,735.00
<b>Component Description:</b>	CP Application Modification								
<b>Amount:</b>	\$1,240.00								
<b>Component Description:</b>	FCC Form 2100 Construction Permit Application								
<b>Amount:</b>	\$1,735.00								
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.								
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<table> <tr> <td data-bbox="697 875 1007 911"><b>Component Description:</b></td><td data-bbox="1141 875 1374 1070">Legal invoice for Ch. 31 construction permit application work (replaces prior invoices submitted).</td></tr> <tr> <td data-bbox="697 1081 810 1117"><b>Amount:</b></td><td data-bbox="1141 1081 1260 1117">\$4,860.00</td></tr> </table>	<b>Component Description:</b>	Legal invoice for Ch. 31 construction permit application work (replaces prior invoices submitted).	<b>Amount:</b>	\$4,860.00				
<b>Component Description:</b>	Legal invoice for Ch. 31 construction permit application work (replaces prior invoices submitted).								
<b>Amount:</b>	\$4,860.00								
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.								
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	<table> <tr> <td data-bbox="697 1440 1007 1476"><b>Component Description:</b></td><td data-bbox="1141 1440 1374 1597">Legal invoice for Ch. 31 FAA filing work (replaces prior invoices submitted).</td></tr> <tr> <td data-bbox="697 1608 810 1644"><b>Amount:</b></td><td data-bbox="1141 1608 1238 1644">\$210.00</td></tr> </table>	<b>Component Description:</b>	Legal invoice for Ch. 31 FAA filing work (replaces prior invoices submitted).	<b>Amount:</b>	\$210.00				
<b>Component Description:</b>	Legal invoice for Ch. 31 FAA filing work (replaces prior invoices submitted).								
<b>Amount:</b>	\$210.00								

Prepare and or review  
reimbursement form

**Component Description:**

Legal invoice for  
cost estimates  
/reimbursements  
work. Request  
reimburse \$2500  
approved in  
allotment, vendor  
wrote off/credit for  
\$1250 per retainer;  
adds cover letter to  
previously  
submission.

**Amount:**

\$2,500.00

**Component Description:**

Legal Services

**Amount:**

\$30.00

**Component Description:**

Legal invoice for  
cost estimates  
/reimbursements  
work. Request  
reimburse \$2500  
approved in  
allotment, vendor  
wrote off/credit for  
\$1250 per retainer.

**Amount:**

\$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
<b>Other Expenses</b>	<b>\$2,695.00</b>	<b>\$2,645.00</b>		<b>\$0.00</b>	
MVPD Notification of Channel Change	<i>\$1,000.00</i>	\$1,000.00	Prepare and send notices to MVPDs.	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$250.00</i>	\$250.00	Voice talent to tape announcement.	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	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
<b>Sub-total</b>	<b>\$2,695.00</b>	<b>\$2,645.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$846,520.00</b>	<b>\$804,750.00</b>	<b>N/A</b>	<b>\$17,475.00</b>	<b>N/A</b>

### Components

Information not provided.

<b>Cost Information</b>	<b>Grand Total</b>		
		<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>
			<b>Actual Cost</b>
	<b>Total for all systems</b>	\$846,520.00	\$804,750.00
			\$17,475.00

<b>Reimbursement Status</b>	<b>Question</b>	<b>Response</b>
	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	<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"> <li>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.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>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.</li> </ol>	

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><b>William Smith</b>  <i>President</i></p> <p>07/09/2019</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"> <li>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.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	

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><b>William Smith</b> <i>President</i></p> <p>07/09/2019</p>

## Attachments