

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Channel: 29 (UHF) **18267** Service: **DTV** Call **WKOP-TV** Facility Sign:

ID: 0000025313

Number:

File

FRN: 0001773852 Date 08/27

> Submitted: /2019

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
EAST TENNESSEE PUBLIC COMMUNICATIONS CORP. Doing Business As: EAST TENNESSEE PUBLIC COMMUNICATIONS CORP.	Tony Poole 1611 E. MAGNOLIA AVENUE KNOXVILLE, TN 37917 United States	+1 (865) 595- 0220	tony@easttennesseepbs. org	Not-for- Profit

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Information

Preparer Contact Name and Information

Robert GehmanRobert Gehman+1 (352)bob@kesslerandgehman.ConsultingEngineer507 NW 60332-3157comKessler and GehmanStreetAssociates, Inc.Suite DGainesville, FL32607United States	Applicant	Address	Phone	Email
	ConsultingEngineer Kessler and Gehman	507 NW 60 Street Suite D Gainesville, FL 32607	` ,	· ·

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	Replace transmitter using existing antenna and line.

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	Diamond
	Year	2007
	Туре	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	10 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	EC712HP-BB
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	10 kW
	Justification for New Transmitter	The manufacturer of the existing transmitter advises that the transmitter cannot be retuned to the assigned channel. See attachment.

Primary Transmitter

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	Yes

	Size	3 inches
	Length	100.0 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 Transmitter

Other Transmitter Cost Not Listed

Name	Description
Additional Interior RF System	Interior RF System Existing Transmitter to Interim Transmission line
Standby Exciter and Switch	Standby Exciter with Automatic Change Over Switch

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	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	Yes
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna	Class	Full Power
Manufacturer and Type	Mounting	Top Mount
	Antenna position in stack	Not in Stac
	Polarization	Horizontal
	Туре	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A

Upper Limit	N/A
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	100.0 kW
Manufacturer	Andrew
Model	ABBP16H3- HTO5-17 /30H
Year	2007

Facility ID's and Call Signs of all stations with whom the antenna is shared.

Facility ID	Call Sign
35908	WVLT-TV

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?	No
	Туре	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	_

Primary Antenna

Other Antenna Cost Not Listed

Name	Description
Rigging	Rigging to replace and/or retune the elbow complex
RF System Test	RF System Test
Combiner Interconnect parts	Combiner Interconnect parts
Combiner Installation	Combiner Installation
New Combiner	New Combiner

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

Primary Transmission

Existing Transmission Line

Section	Question	Response
Existing Transmission Line Description	Type of change	Utilize Existing
	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 Line Manufacturer and Type	Manufacturer	Dielectric
	Туре	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1450 feet per run

Primary Transmission

Other Transmission Line Expenses Not Listed

n Line	Description
Sweep Tests	Sweep tests associated with the elbow complex tuning or replacement with the assistance of a rigger

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

Section	Question	Response
al Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	34
	Explanation	Fewer Project Management "PM" tasks are required & Other Engineering Services "OES" are required, therefore the PM total has been reduced to 34 hrs (\$5,100 at \$150/hr), & a new OES category has been created & funded with the money removed from PM.
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
Prepare and file Form FCC Construction Permit Application	Yes
For Auxiliary Facility	No
For Main Facility	Yes
Prepare and file Form FCC License to Cover Application	Yes
For Auxiliary Facility	No
For Main Facility	Yes
Prepare request for Special Temporary Authority	No
Quantity	N/A
NEPA Section 106 environmental review	No
Environmental Assessment	No
ASR Modification	No
FAA Consultation (including preparation of FAA Form 7460)	No
Negotiation of Lease and other Matter for Shared Locations	No
Prepare or Review FCC Form 399 for Reimbursement	Yes

Attorney and Other Outside Consulting

Services

	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	Yes
	Additional Field Engineering Service	Yes
	Number of Days	9
	Justification	It will be necessary to survey the site, plan the equipment, develop specifications for purchasing, and oversee multiple vendor RF projects. Station does not have available personnel or personnel trained in such services.

Outside Professiona

Other Professional Services Expenses Not Listed

sional	Services Costs	Description		
	Other Engineering Services	Fewer Project Management "PM" tasks are required & Other Engineering Services "OES" are required, therefore the PM total has been reduced to 34 hrs (\$5,100 at \$150 /hr), & a new OES category has been created & funded with the money removed from PM.		

Other Expenses

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	Yes
	Is Remediation needed?	Yes
Facility Expenses	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
Permit and Filing Costs	Local Zoning	No
	Non-zoning permits	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	No
	FCC Special Temporary Authority Application	No
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	No
	Does this relocation require MVPD Notification of a Channel Change?	Yes

Other Expenses Not Listed

Expenses Information not provided.

Cost Information

Transmitters

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmitter EC712HP-BB	\$728,450.00	\$539,229.00		\$308,729.00	
UHF - Liquid Cooled Solid State Transmitter 8.2 - 13 kW	\$494,500.00	\$308,729.00	N/A	\$308,729.00	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$4,900.00	N/A	N/A	N/A
Standby Exciter and Switch	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Additional Interior RF System	\$140,000.00	\$140,000.00	N/A	N/A	N/A
Sub-total	\$728,450.00	\$539,229.00	N/A	\$308,729.00	N/A
Total for all systems	\$1,071,322.00	\$873,209.00	N/A	\$414,317.44	N/A

Components

Actual Information	
Description	File Name

UHF - Liquid Cooled Solid State Transmitter 8.2 - 13 kW	Component Description: Amount:	Comark 12101-3A v190612jgv2 \$114,641.43
	Component Description:	Comark inv #12101- B Primary transmitter pmt 1 UL20190208jgv2
	Amount:	\$194,087.57
Switchgear - industrial 800 amp	Information not provided.	
Transformer 3 phase/480v - 150 KVA	Information not provided.	
3" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Standby Exciter and Switch	Information not provided.	
Additional Interior RF System	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 ABBP16H3- HTO5-17/30H	\$98,630.00	\$96,200.00		\$63,200.00	
New Combiner	\$37,000.00	\$37,000.00	See attached American Tower LLC invoice 460218498	\$37,000.00	N/A
Combiner Installation	\$11,200.00	\$11,200.00	See attached American Tower LLC invoice 460218498	\$11,200.00	N/A
Combiner Interconnect parts	\$5,000.00	\$5,000.00	See attached American Tower LLC invoice 460218498	\$5,000.00	N/A
RF System Test	\$5,000.00	\$5,000.00	See attached American Tower LLC invoice 460218498	\$5,000.00	N/A
Sweep test of existing antenna	\$6,730.00	\$5,000.00	See attached American Tower LLC invoice 460218498	\$5,000.00	N/A

Elbow complex, broadband, at antenna input, per 6 1 /8. feedline (if needed)	\$13,700.00	\$13,000.00	N/A	N/A	N/A
Rigging	\$20,000.00	\$20,000.00	N/A	N/A	N/A
Sub-total	\$98,630.00	\$96,200.00	N/A	\$63,200.00	N/A
Total for all systems	\$1,071,322.00	\$873,209.00	N/A	\$414,317.44	N/A

Components

Actual Information Description	File Name	
New Combiner		
	Component Description:	Am Twr
		460218498
		v190827jgv1
	Amount:	\$37,000.00
Combiner Installation		
	Component Description:	Am Twr
		460218498
		v190827jgv1
	Amount:	\$11,200.00
Combiner Interconnect parts		
	Component Description:	Am Twr
		460218498
		v190827jgv1
	Amount:	\$5,000.00
RF System Test		
	Component Description:	Am Twr
		460218498
		v190827jgv1
	Amount:	\$5,000.00

Sweep test of existing		
antenna	Component Description:	Am Twr 460218498
		v190827jgv1
	Amount:	\$5,000.00
Elbow complex, broadband, at antenna input, per 6 1/8. feedline (if needed)	Information not provided.	
Rigging	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	\$6,400.00	\$6,400.00		\$0.00	
Sweep Tests	\$6,400.00	\$6,400.00	N/A	N/A	N/A
Sub-total	\$6,400.00	\$6,400.00	N/A	\$0.00	N/A
Total for all systems	\$1,071,322.00	\$873,209.00	N/A	\$414,317.44	N/A

Components

Information not provided.

Tower Equipment and Rigging Costs

Cost Information

Information 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	\$175,352.00	\$170,880.00		\$37,213.44	
Other Engineering Services	\$21,750.00	\$21,750.00	N/A	\$1,808.00	N/A
Project management of the transition	\$5,372.00	\$16,130.00	See attached American Tower LLC invoice 460218498 and various Kessler and Gehman invoices	\$16,130.00	Outside Proj Manageme Services, Fo 387 Progre Report.
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	\$8,750.00	See attached American Tower LLC invoice 460218498 and Kessler and Gehman invoice 950-02	\$8,750.00	Engineerin study for ne channel assignment antenna developme for WKOI

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$2,000.00	Engineeri section of F FCC Constructi Permit Applicatio Main Facilit WKOP
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), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$10,000.00	The Estimated Cost shown is to cover the expense of having Actual Cost invoices prepared and submitted into this 399 Reimbursement Form.	\$5,141.00	Prepare of Review FO Form 399 Reimburser for WKO
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$397.50	Attorney section of F FCC Constructi Permit Applicatio Main Facility
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A

RF Exposure Measurements	\$21,050.00	\$2,000.00	N/A	N/A	N/A
Additional Field Engineering Service, 9 Days	\$18,000.00	\$18,000.00	N/A	\$2,986.94	Additional Fi Engineerin Service, on- equip invent and facilitie survey for p trans planni WKOP
Sub-total	\$175,352.00	\$170,880.00	N/A	\$37,213.44	N/A
Total for all systems	\$1,071,322.00	\$873,209.00	N/A	\$414,317.44	N/A

Components

Actual Information	
Description	File Name

	Component Description	KGA inv #950-26
	Component Description:	Actual Cost invs
		190110-190131
		UL20190228jgv1
	Amount:	\$325.00
	Component Description:	KGA 950-35
		v190702jgv1
	Amount:	\$325.00
	Component Description:	KGA inv #950-22
		Actual Cost invs
		181130-190119
	Amount:	UL20190201jgv1 \$575.00
	Component Description:	KGA inv #950-20
		Actual Cost invoices Nov 2018
		UL20190117jgv1
	Amount:	\$450.50
	Component Description:	KGA inv #950-21
		RF Design and
		calcs
		UL20190117jgv1
	Amount:	\$132.50
roject management of ne transition		W0 1 0 0 0 0 0
	Component Description:	KGA 950-33 v190702jgv1
	Amount:	\$150.00
	Amount	ψ100.00
	Component Description:	Am Twr 460218498
	Amount	v190827jgv1
	Amount:	\$9,480.00

Component Description: Am Twr 460218498

v190827jgv1 \$5,000.00

Amount: \$5,000.00

Component Description: KGA inv #950-14

2018 Q2 387 UL20190201jgv1

Amount: \$150.00

Component Description: KGA inv #950-13

2018 Q1 387 UL20190201jgv1

Amount: \$225.00

Component Description: Outside Project

Management

Services, Form 387 Progress Report for

WKOP

Amount: \$300.00

Component Description: KGA inv #950-09

Actual Cost invoices

UL20181210jgv1

Amount: \$300.00

Component Description: KGA inv #950-25

2018 Q4 387 UL20190201jgv1

Amount: \$150.00

Component Description: KGA inv #950-11

2017 Q4 387 UL20181210jgv1

Amount: \$225.00

Address transition timing	Component Description: Amount: Information not provided.	KGA inv #950-18 2018 Q3 387 UL20190201jgv1 \$150.00
and coordination issues w/ other stations and wireless	·	
Perform engineering study for new channel assignment and antenna development	Component Description: Amount:	Am Twr 460218498 v190827jgv1 \$5,000.00
	Component Description: Amount:	Engineering study for new channel assignment and antenna development \$3,750.00
	Component Description: Amount:	Engineering study for new channel assignment and antenna development for WKOP \$3,750.00
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	CP Application for Main Facility \$2,000.00
	Component Description: Amount:	Engineering section of Form FCC Construction Permit Application Main Facility for WKOP \$2,000.00

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.

Prepare and or review reimbursement form

Component Description: KGA 950-40

v190702jgv1

Amount: \$800.00

Component Description: KGA 950-30

v190702jgv1

Amount: \$50.00

Component Description: KGA 950-29

v190702jgv1

Amount: \$975.00

Component Description: KGA 950-34

v190702jgv1

Amount: \$381.00

Component Description: Prepare or Review

FCC Form 399 for

Reimbursement for

WKOP. See attached KGA Repack Services Proposal to justify

fixed fee.

Amount: \$2,500.00

Component Description: Attorney Review

FCC Form 399 for

Reimbursement for

WKOP

Amount: \$435.00

Attorney Fees - Prepare and File FCC Form 2100 **Component Description:** Attorney section of (main), Construction Form FCC Permit Application **Construction Permit Application Main** Facility \$37.50 **Amount: Component Description:** Attorney section of Form FCC **Construction Permit** Application Main Facility for WKOP \$360.00 Amount: Comprehensive coverage Information not provided. verification via field study, if needed RF Exposure Information not provided. Measurements Additional Field Engineering Service, 9 **Component Description:** KGA inv #950-01 Days Facility Elec Survey and Condition Assessment UL20181130jgv1 **Amount:** \$2,986.94

Cost Information

Other Expenses

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

	Predetermined	Estimated	Estimated Cost		Actual Cost
Description	Cost Estimate	Cost	Justification	Actual Cost	Justification
Other Expenses	\$62,490.00	\$60,500.00		\$5,175.00	
AM Pattern Disturbance Impact study	\$7,890.00	\$7,500.00	N/A	N/A	N/A
AM Pattern Disturbance Remedy	\$21,050.00	\$20,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$3,420.00	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$10,000.00	\$10,000.00	N/A	N/A	N/A
MVPD Notification of Channel Change	\$2,000.00	\$2,000.00	N/A	\$1,755.00	N/A
Sub-total	\$62,490.00	\$60,500.00	N/A	\$5,175.00	N/A
Total for all systems	\$1,071,322.00	\$873,209.00	N/A	\$414,317.44	N/A

Components

Description	File Name	
AM Pattern Disturbance Impact study	Information not provided.	
AM Pattern Disturbance Remedy	Information not provided.	
DTV Medical Facility Notification	Component Description: Amount:	KGA 950-38 v190703jgv1 \$3,420.00
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.	
Equipment Delivery and Handling Charges	Information not provided.	
MVPD Notification of Channel Change	Component Description: Amount:	KGA 950-37 v190703jgv1 \$1,755.00

Cost Information

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,071,322.00	\$873,209.00	\$414,317.44

Reimbursem	entestatus	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. Jeffrey C Gehman Engineering Associate

08/27/2019

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. Jeffrey C Gehman Engineering Associate

08/27/2019

Attachments