

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Service: DCA Facility 168662 WMEU-CD Channel: Call

ID: Sign: File

Number:

FRN: 0002855179 Date 11/02

> Submitted: /2020

0000028288

Applicant Information

Applicant Name, Type, and Contact Information

18 (UHF)

Applicant	Address	Phone	Email	Applicant Type
WEIGEL BROADCASTING CO. Doing Business As: WEIGEL BROADCASTING CO.	Norman H. Shapiro 26 NORTH HALSTED STREET CHICAGO, IL 60661 United States	+1 (312) 705- 2600	nshapiro@wciu. 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.	Yes
Briefly describe transition plan	WMEU broadcasts from Willis Tower in Chicago, IL. WMEU plans to operate on its current licensed facility until the time of transition. A new antenna and transmitter will be installed due to the channel change.

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	TDU2 4K00 AV
	Year	2011
	Туре	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power Capacity	5 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	THU9evo-4
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	6.4 kW
	Justification for New Transmitter	The current mask filter is channel-specific and must be replaced. The current transmitter is no longer supported by the manufacturer and as a result, is unable to 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	Yes
	Description	Retrofit of existing electrical service for WMEU Primary Transmitter
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Туре	Cooling Only
	Size	10 tons
	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
Structural Analysis	WMEU's transmission facility is located on floor 101 of Willis Tower. Willis Tower requires a detailed analysis of all equipment loads with respect to the structural aspects of the building.

State and City Taxes	Sate and city taxes are required for equipment that is purchased, but not services.
Structural Modifications	As a result of the structural analysis, modifications may be required.
Transmitter Installation	Willis Tower has unique labor requirements. Standard transmitter installation practices are not allowed due to labor agreements. Only building electrical and plumbing contractors may perform any electric or plumbing work related to the installation.

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?	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	Elliptical
	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)	15.0 kW

Manufacturer	
Model	TLP-4M/VP
Year	2011

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?	Yes
New Antenna	Class	Class A
Manufacturer and Types	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Туре	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	11.0 kW
	Manufacturer	
	Model	TLP-4M/VP

Year	2019
Justification for New Antenna	The current WMEU antenna is a slot antenna designed for channel 32. An equivalent replacement antenna is being proposed for channel 18.

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
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Other Antenna Cost Not Listed

Name	Description
State and City Taxes	State and city taxes are required for equipment that is purchased, but not services.

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

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	Leased
	Is this tower consider Complex?	Located on Building
	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?	No
	Is tower compliant with Rev G?	No
Existing Tower Structure	Do you have a tower registration number?	Yes
Registration	ASR Number	1032959
Coordinates (NAD83 (North American Datum of	Latitude (NAD83)	41° 52' 44.1" N-
1983))		<u> </u>

Longitude (NAD83)	087° 38′ 10.2" W-
Overall Structure Height	1729.97 feet
Support Structure Height	1435.35 feet
Ground Elevation Above Mean Sea Level (AMSL)	595.14 feet
Structure Type	BTWR - Building with Tower
Tower Owner	233 Broadcast, LLC
Date Constructed	01/01/2002

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

Call Sign	Service
WGN-TV	DTV
WJMK	FM
WMAQ-TV	DTV
WPWR-TV	DTV
WWME-CD	DTV
WFMT	FM
WTTW	DTV
WCIU-TV	DTV
WFLD	DTV
WLS-FM	FM
WLIT-FM	FM
WSNS-TV	DTV
	WGN-TV WJMK WMAQ-TV WPWR-TV WWME-CD WFMT WTTW WCIU-TV WFLD WLS-FM WLIT-FM

71283	WCFS-FM	FM
9613	WBBM-FM	FM
9617	WBBM-TV	DTV
6377	WTMX	FM
66978	WEDE-CD	DTV

Other Types of Users

Users
LD TV Services
FX FM Services
LM Land Mobile

Primary Tower

Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for undocumented /poorly documented tower
Tower Reinforcements	Please select whether tower reinforcements are needed:	Minor Reinforcements needed

Primary Tower

Tower Rigging Costs

Section	Question	Response
Tower Rigging Costs	Complex Tower	Located on Building
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?	No
	Number of Hours	N/A
	Explanation	N/A
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	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	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	Yes
Prepare or Review FCC Form 399 for Reimbursement	Yes
Address transition timing and coordination ssues w/ other stations and wireless providers	Yes
Comprehensive coverage verification via ield study	No
RF exposure measurements	No
Additional Field Engineering Service	No
Number of Days	N/A
lustification	N/A
	Ruantity IEPA Section 106 environmental review Environmental Assessment ISR Modification IAA Consultation (including preparation of IAA Form 7460) Regotiation of Lease and other Matter for Ishared Locations Prepare or Review FCC Form 399 for Reimbursement Indicates transition timing and coordination issues w/ other stations and wireless roviders Comprehensive coverage verification via a leld study RF exposure measurements Indicated Engineering Service Reduction 106 environmental review Indicated Ind

Outside
Professional Services Expenses Not Listed
Professional Services © pstsided.

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?	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 Primary Transmitter THU9evo-4	Predetermined Cost Estimate \$393,891.00	Estimated Cost \$352,665.91	Estimated Cost Justification	Actual Cost \$229,174.91	Actual Cost Justification
Other Electrical Service: Retrofit of existing electrical service for WMEU Primary Transmitter	\$20,000.00	\$20,000.00	N/A	N/A	N/A
10 Ton system	\$38,900.00	\$37,000.00	N/A	N/A	N/A
Structural Analysis	\$5,500.00	\$5,500.00	Willis Tower requires loading studies for equipment that exceeds the normal tenant office loads, such as broadcast equipment. Actual costs to be determined once the final equipment selection has been made.	N/A	N/A

Structural Modifications	\$17,500.00	\$17,500.00	Willis Tower requires	N/A	N/A
			loading		
			studies for		
			heavy		
			equipment		
			that is		
			installed in		
			the building.		
			As a result, it		
			is anticipated		
			that		
			additional		
			reinforcement		
			will be		
			required.		
			Actual costs		
			to be		
			determined		
			once final		
			equipment		
			selection has		
			been made.		
Transmitter	\$20,000.00	\$20,000.00	Willis Tower	N/A	N/A
Installation			requires		
			union labor		
			for all electric		
			and cooling		
			connections.		
			This is a		
			general		
			allowance to		
			cover the		
			additional		
			labor fees for		
			union labor to		
			perform the		
			transmitter		
			installation		
			and building		
			water		

State and City Taxes	\$18,491.00	\$18,491.00	State and city taxes are required for equipment that is purchased, but not services.	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW	\$273,500.00	\$234,174.91	N/A	\$229,174.91	N/A
Sub-total	\$393,891.00	\$352,665.91	N/A	\$229,174.91	N/A
Total for all systems	\$1,106,783.50	\$528,393.41	N/A	\$229,174.91	N/A

Components

Actual Information Description	File Name
Other Electrical Service: Retrofit of existing electrical service for WMEU Primary Transmitter	Information not provided.
10 Ton system	Information not provided.
Structural Analysis	Information not provided.
Structural Modifications	Information not provided.
Transmitter Installation	Information not provided.
State and City Taxes	Information not provided.

UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW

Component Description: WMEU Primary

Amount:

Transmitter

Downpayment

\$53,923.50

Component Description: WMEU Primary

Transmitter Final

Payment

Amount: \$175,251.41

Cost Information

Antennas

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
Primary Antenna TLP-4M/VP	\$35,592.50	\$33,962.50		\$0.00	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - Lower Power Side Mount, Class A One Station antenna basic	\$26,300.00	\$25,000.00	wmeu currently utilizes an elliptically polarized antenna. The proposed elliptically polarized antenna is slightly more than the FCC estimated amount.	N/A	N/A
State and City Taxes	\$2,562.50	\$2,562.50	State and city taxes are required for equipment that is purchased, but not services.	N/A	N/A
Sub-total	\$35,592.50	\$33,962.50	N/A	\$0.00	N/A
Total for all systems	\$1,106,783.50	\$528,393.41	N/A	\$229,174.91	N/A

Components

Information not provided.

Transmission Line

Cost Information

Information 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 BTWR	\$605,300.00	\$72,500.00		\$0.00	
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$35,000.00	N/A	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$25,000.00	N/A	N/A	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$12,500.00	N/A	N/A	N/A
Sub-total	\$605,300.00	\$72,500.00	N/A	\$0.00	N/A
Total for all systems	\$1,106,783.50	\$528,393.41	N/A	\$229,174.91	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
Outside Professional Services	\$34,920.00	\$32,750.00		\$0.00	
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A

Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	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
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	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 request for Special Temporary Authorization	\$2,050.00	\$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	N/A	N/A
	\$24 020 00	\$32,750.00	N/A	\$0.00	N/A
Sub-total	\$34,920.00	ψ0 = ,. σσ.σσ	•		

Information not provided.

Cost Information

Other Expenses

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Other Expenses	\$37,080.00	\$36,515.00		\$0.00	
MVPD Notification of Channel Change	\$2,500.00	\$2,500.00	Notification to all MVPD regarding channel changes.	N/A	N/A
Equipment Delivery and Handling Charges	\$2,500.00	\$2,500.00	Willis Tower loading dock after hours fees.	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$20,000.00	\$20,000.00	Removal of WMEU solid state transmitter cabinet, RF system, electrical system, and cooling system.	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	\$11,000.00	N/A	N/A	N/A
Sub-total	\$37,080.00	\$36,515.00	N/A	\$0.00	N/A
Total for all systems	\$1,106,783.50	\$528,393.41	N/A	\$229,174.91	N/A

Components

Information not provided.

Cost Information

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,106,783.50	\$528,393.41	\$229,174.91

Reimbursem	enrestiatus	Response
	The facility has ceased operating on its pre- auction channel.	Yes
	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. Kyle Walker VP Technology

11/02/2020

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. **Kyle Walker** *VP Technology*

11/02/2020

Attachments