

(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility 10535 Service: DCA Call KPSP-CD Channel: 18 (UHF)

ID: Sign:

03/27

ID: File

0000026847

Number:

FRN: **0001590330** Date

Submitted: /2018

# Applicant Information

#### **Applicant Name, Type, and Contact Information**

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

# Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

#### Preparer Contact Information

#### **Preparer Contact Name and Information**

Applicant	Address	Phone	Email
The Preparer is same as the reimbursement contact			

## Broadcaster Information and Transition Plan

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	No
Briefly describe transition plan	FILE STA AND BUILD INTERIM ANTENNA FACILITY. MOVE EXISTING TRANSMITTER TO INTERIM ANTENNA. BUILD NEW ANTENNA SYSTEM AND INSTALL NEW TRANSMITTER. TEST AND CUT OVER. REMOVE OLD ANTENNA SYSTEM AND TRANSMITTER.

## **Transmitters**

rs	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	DT834A
	Year	2001
	Туре	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	1 kW

# Primary Transmitter

## **New Transmitter Costs**

Section	Question	Response
New	Use	Primary (Main)
Transmitter	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	UAXTE-2R37
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1 kW
	Justification for New Transmitter	SEE ATTACHED "RALEIGH-#349249-v1- KPSP- CD_Form_399_New_Transmitter_Justificati. pdf"

# Primary Transmitter

## **Other Transmitter Costs**

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

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

#### Primary 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?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna	Class	Class A
Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Other
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Other Antenna Type	PARPANEL
	ERP: (Effective Radiated Power)	5.83 kW
	Manufacturer	

Model	4DR-8S
Year	1998

## **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 Manufacturer and Types	Class	Class A
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Other
	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	PARAPANEL
	ERP: (Effective Radiated Power)	5.83 kW
	Manufacturer	
	Model	4DR-8S

Year	2017
Justification for New Antenna	EXISTING ANTENNA WILL NOT TUNE TO NEW FREQUENCY

#### **Other Antenna Costs**

Section	Section Question	
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?	Yes
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** 

#### Interim Antenna

## **New Antenna Costs**

Section	Question	Response
New Antenna	Use	Interim
Description	Description of Use	N/A
	Change Type	Purchase New
	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 Type	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Broadband Panel
	Number of Stations Supported	1
	Number of Panels/Bays	8
	Lower Limit	470.00 MHz
	Upper Limit	862.00 MHz
	Design power capacity in use	50.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	8.0 kW
	Manufacturer	
	Model	4X2 K723147
	Year	2017

Justification for New Antenna	TO AVOID
	EXCESSIVE
	DOWNTIME WE
	NEED TO
	INSTALL A
	TEMPORARY
	ANTENNA
	WHILE
	RIGGING THE
	TRANSMISSION
	SYSTEM.

#### Interim Antenna

#### **Other Antenna Costs**

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

## Interim Antenna

**Other Antenna Cost Not Listed** 

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

# Primary Transmissio

# **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	Manufacturer	N/A
Line Manufacturer and Type	Туре	Flexible Foam
	Diameter	7/8 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	150 feet per run

# Other Transmission Line Expenses Not Listed

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

Structure Type	LTOWER - Lattice Tower
Tower Owner	Inside Tower
Date Constructed	11/01/1979

# Primary Tower

# **Tower Rigging Costs**

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

# Primary Tower

# Other Tower Expenses Not Listed

# Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	150
	Explanation	TO ENSURE TIMELINESS, SAFETY AND ADEQUATE EXPERTISE FOR A PROJECT OF THIS SCOPE AND SIGNIFICANCE, OUTSIDE PROJECT MANAGEMENT SERVICES ARE WARRANTED FOR A MODEST PERIOD OF TIME, PROJECTED AT 150 HOURS EST.
Outside RF consulting	Perform engineering study for new channel assignment and antenna development	Yes
Engineering Services	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	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

Al Services Costs  Description			
BROOKS PIERCE	NON-CATALOG LEGAL SERVICES SUCH AS REVIEW OF QUARTERLY		
	TRANSITION STATUS REPORTS AND OTHER MISCELLANEOUS NON-		
	CATALOG LEGAL FEES		

# Other Expenses

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

Other Expenses Not Listed

**Expenses** Information not provided.

# **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 UAXTE-2R37	\$141,180.00	\$93,007.80		\$0.00	
2" Rigid Conduit and Wiring (Cost per foot)	\$780.00	\$750.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$82,457.80	N/A	N/A	N/A
Service entrance 3 phase/800 amp /208 volt	\$14,400.00	\$9,800.00	N/A	N/A	N/A
Sub-total	\$141,180.00	\$93,007.80	N/A	\$0.00	N/A
Total for all systems	\$391,370.00	\$234,412.80	N/A	\$6,116.20	N/A

# Components

# **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
Interim Antenna 4X2 K723147	\$53,110.00	\$15,000.00		\$0.00	
UHF - Lower Power Side Mount, Class A One Station antenna basic	\$26,300.00	\$0.00	N/A	N/A	N/A
UHF - Lower Power Side Mount, Class A broadband panel (cost per panel)	\$10,080.00	\$0.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$5,000.00	N/A	N/A	N/A
UHF – Broadband Panel, Side Mount Auxiliary /Interim, 8 horizontally polarized	\$10,000.00	\$10,000.00	BROADBAND PANEL ANTENNA NEEDED TO REMAIN OPERATIONAL AS NEW ANTENNA IS INSTALLED AND TESTED.	N/A	N/A

Primary Antenna 4DR-8S	\$33,030.00	\$5,000.00		\$0.00	
UHF - Lower Power Side Mount, Class A One Station antenna basic	\$26,300.00	\$0.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$5,000.00	N/A	N/A	N/A
Sub-total	\$86,140.00	\$20,000.00	N/A	\$0.00	N/A
Total for all systems	\$391,370.00	\$234,412.80	N/A	\$6,116.20	N/A

# Components

# **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	\$0.00	\$0.00		\$0.00	
Sub-total	\$0.00	\$0.00	N/A	\$0.00	N/A
Total for all systems	\$391,370.00	\$234,412.80	N/A	\$6,116.20	N/A

## Components

# **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 LTOWER	\$84,200.00	\$65,070.00		\$0.00	
Short Tower (less than 500')	\$84,200.00	\$65,070.00	N/A	N/A	N/A
Sub-total	\$84,200.00	\$65,070.00	N/A	\$0.00	N/A
Total for all systems	\$391,370.00	\$234,412.80	N/A	\$6,116.20	N/A

## Components

# **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	\$59,410.00	\$45,500.00		\$6,116.20	
Project management of the transition	\$23,700.00	\$18,750.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
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	\$2,000.00	N/A	\$437.50	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$1,000.00	N/A	\$1,000.00	N/A

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	\$4,678.70	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 request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
BROOKS PIERCE	\$5,000.00	\$5,000.00	NON-CATALOG LEGAL SERVICES SUCH AS REVIEW OF QUARTERLY TRANSITION STATUS REPORTS AND OTHER MISCELLANEOUS NON-CATALOG LEGAL FEES	N/A	N/A

Sub-total	\$59,410.00	\$45,500.00	N/A	\$6,116.20	N/A
Total for all systems	\$391,370.00	\$234,412.80	N/A	\$6,116.20	N/A

# Components

Actual Information Description	File Name	
Project management of the transition	Information not provided.	
Prepare and or review reimbursement form	Information not provided.	
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.	
Perform engineering study for new channel assignment and antenna development	Component Description:  Amount:	Engineering study work for new channel assignment and antenna development. \$375.00
	Component Description:  Amount:	Engineering study work for new channel assignment and antenna development. \$62.50
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description:  Amount:	Engineering study work for new channel assignment and antenna development. \$1,000.00

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare request for Special Temporary Authorization	Information not provided.	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description:	General Filing an associated costs 2017 see "Repac
	Amount:	Invoice Memo" \$2,292.40
	Component Description:	KPSP Charges related to CP.
	Amount:	\$2,386.30
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.	
BROOKS PIERCE	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 Cos Justificatio
Other Expenses	\$20,440.00	\$10,835.00		\$0.00	
DTV Medical Facility Notification	\$11,550.00	\$2,000.00	N/A	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
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$2,500.00	\$2,500.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$1,500.00	\$1,500.00	N/A	N/A	N/A
Equipment Storage	\$2,500.00	\$2,500.00	N/A	N/A	N/A

Total for all systems	\$391,370.00	\$234,412.80	N/A	\$6,116.20	N/A
Sub-total	\$20,440.00	\$10,835.00	N/A	\$0.00	N/A
Develop and air announcement of upcoming channel change	\$750.00	\$750.00	PRODUCTION COSTS NECESSARY ADVERTISING ANNOUNCEMENTS	N/A	N/A

# Components

# Cost Information

## **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$391,370.00	\$234,412.80	\$6,116.20

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. James W
DeChant
VP of
Technology

03/27/2018

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. James W
DeChant
VP of
Technology

03/27/2018

#### **Attachments**