

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility 71111 Service: DCA Call W40CN-D Channel: 27 (UHF)

ID:

Sign:

File **0000028236**

Number:

FRN: 0001843697

Date 11/15

Submitted: /2018

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
LOCAL MEDIA TV CHICAGO, LLC	5670 WILSHIRE BLVD., SUITE 1620 LOS ANGELES, CA 90036 United States	+1 (323) 904-4090	form399@LOOP. COM	Limited Liability Company

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Information

Preparer Contact Name and Information

Applicant Address Phone Email

The Preparer is same as the reimbursement contact.

Broadcaster Information and Transition Plan Question Response

Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	No
Briefly describe transition plan	The plan is for W40CN-D is to replace the existing channel 40 system with a new channel 27 and new transmitter and a lower gain antenna, at a new site.

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	AT73-1KS
	Year	2010
	Туре	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	1.5 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?	No
	Manufacturer	
	Model	THU9EVO-3
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	4.9 kW
	Justification for New Transmitter	W40CN-D is require to replace its existing transmission system and will be purchasing a replacement for its existing main transmitter.

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	2 inches
	Length	20.0 feet
	Other Electrical Service	Yes
	Description	The new matransmitter require reconfigurate of the electrical service on site. The electrical was cost has be estimated based on verbal guidance for local electrical electrical electrical contractors
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?	Yes
	Size	100.0 squa
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

Other Transmitter Cost Not Listed

Primary
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?	No
Existing Antenna	Class	Class A
Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	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)	15.0 kW

Manufacturer	
Model	SWEDLBWLS /40
Year	2010

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	Class	Class A
Manufacturer and Types	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	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)	11.5 kW
	Manufacturer	
	Model	TLP-4M C/P

Year	2017
Justification for New Antenna	The existing main antenna is single-channel and cannot be retuned. A replacement antenna is necessary due to the channel change.

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?	Yes

Sweep Test	Do you require the sweep testing of	Yes
	transmission line and antenna?	

Other Antenna Cost Not Listed

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

Primary Transmission Line

Existing Transmission Line

n Line Section	Question	Response
Existing Transmission Line Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Туре	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	232 feet per run

New Transmission Line

Primary Transmission

Section Section	Question	Response
New Transmission Line Costs	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Туре	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	235 feet per run
	Justification for New Transmission Line	W40CN-D needs to install the new antenna and line prior to removing the existing antenna and line in order to avoid a prolonged period off air.

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	Modify Existing
	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)	No
	Others Types of Users	Yes
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure	Do you have a tower registration number?	Yes
Registration	ASR Number	1210345
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	41° 47' 45.8" N-
	Longitude (NAD83)	088° 27' 30.7" W-
	Overall Structure Height	188.97 feet
	Support Structure Height	180.12 feet
	Ground Elevation Above Mean Sea Level (AMSL)	706.03 feet

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Waubonsee Community College
Date Constructed	04/11/2001

Other Types of Users

Users	
WOJX956	
KZZ870	

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:	No reinforcements needed

Primary Tower

Tower Rigging Costs

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

Primary Tower

Other Tower Expenses Not Listed

Name	Description
Structural Analysis	After the Mapping is complete, a Structural analysis will need to be performed.

Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	2000
	Explanation	W40CN-D does not have sufficient resource capacity and expertise in house to handle all of the Project Management related tasks necessary to facility on- time completion of the station's build by the Construction Deadline
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A

	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting	Prepare and file Form FCC Construction Permit Application	Yes
Services	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	Yes
	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	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	Yes
	Number of Days	8

Justification	RF Project
	management
	of tower and
	transmitter
	installs

Outside
Outside
Professional Services Expenses Not Listed
Professional Services © ostsided.

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	Yes
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	No
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	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?	Yes

Other Expenses

Other Expenses Not Listed

Name	Description
Vehicle Rentals	Required for equipment delivery.

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 THU9EVO-3	\$374,770.00	\$358,100.00		\$0.00	
Other Building Addition Size: 100.0	\$12,000.00	\$12,000.00	N/A	N/A	N/A
Other Electrical Service: The new main transmitter will require reconfiguration of the electrical service on site. The electrical work cost has been estimated based on verbal guidance from local electrical contractors.	\$25,000.00	\$25,000.00	N/A	N/A	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$520.00	\$500.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW	\$273,500.00	\$260,000.00	N/A	N/A	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
Sub-total	\$374,770.00	\$358,100.00	N/A	\$0.00	N/A
Total for all systems	\$1,079,875.00	\$1,032,550.00	N/A	\$20,811.80	N/A

Components

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 TLP-4M C/P	\$33,030.00	\$31,400.00		\$0.00	
UHF - Lower Power Side Mount, Class A One Station antenna basic	\$26,300.00	\$25,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Sub-total	\$33,030.00	\$31,400.00	N/A	\$0.00	N/A
Total for all systems	\$1,079,875.00	\$1,032,550.00	N/A	\$20,811.80	N/A

Components

Transmission Line

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmission Line	\$5,640.00	\$5,405.00		\$0.00	
Flexible Foam Transmission Line - dielectric, 1 5 /8"	\$5,640.00	\$5,405.00	N/A	N/A	N/A
Sub-total	\$5,640.00	\$5,405.00	N/A	\$0.00	N/A
Total for all systems	\$1,079,875.00	\$1,032,550.00	N/A	\$20,811.80	N/A

Components

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	\$122,500.00	\$117,000.00		\$0.00	
Structural Analysis	\$12,000.00	\$12,000.00	N/A	N/A	N/A
Short Tower (less than 500')	\$84,200.00	\$80,000.00	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	\$25,000.00	N/A	N/A	N/A
Sub-total	\$122,500.00	\$117,000.00	N/A	\$0.00	N/A
Total for all systems	\$1,079,875.00	\$1,032,550.00	N/A	\$20,811.80	N/A

Components

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	\$466,440.00	\$443,750.00		\$20,811.80	
Project management of the transition	\$316,000.00	\$300,000.00	N/A	\$15,556.60	N/A
Additional Field Engineering Service, 8 Days	\$16,000.00	\$16,000.00	N/A	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	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

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$0.00	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	\$0.00	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$4,150.00	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
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$1,105.20	N/A
Sub-total	\$466,440.00	\$443,750.00	N/A	\$20,811.80	N/A
Total for all systems	\$1,079,875.00	\$1,032,550.00	N/A	\$20,811.80	N/A

Components

Actual Information Description	File Name	
Project management of the transition		
	Component Description:	Technical, Consultation and Planning Services. Review and answering technical questions through a telephone conference call for the follow up report for the Re-pack.
	Amount:	\$75.00
	Component Description:	Project Management
	Amount:	\$1,296.05
	Component Description:	Project Management
	Amount:	\$1,602.45
	Component Description:	Project Management
	Amount:	\$1,582.05
	Component Description:	Project Management
	Amount:	\$1,780.90
	Component Description:	Project Management
	Amount:	\$1,109.85

Component Description: Project

Management \$1,367,80

Amount: \$1,367.80

Component Description: Project

Management

Amount: \$1,450.85

Component Description: Project

Management

Amount: \$1,301.65

Component Description: Project

Management

Amount: \$1,687.35

Component Description: Technical,

Consultation and

Planning Services.

Amount: \$136.50

Component Description: Project

Management Fees

Amount: \$760.70

Component Description: Technical,

Consultation and

Planning Services.

Amount: \$54.60

Component Description: Re-pack consulting

and updating.

Amount: \$75.00

Component Description: Technical,

Consultation and Planning Services.

Attended a Conference at Rohde and Schwartz on 3/6 /2017 concerning the 399 re-pack documentation.

Amount: \$75.00

Component Description: Technical,

Consultation and Planning Services.

Amount: \$54.60

Component Description: Technical,

Consultation and Planning Services.

Amount: \$54.60

Component Description: Technical,

Consultation and Planning Services.

Technical,

Consultation and Planning Services with Sam Hariton

(Widelity).

Amount: \$75.00

Component Description: Technical,

Consultation and Planning Services.

Amount: \$54.60

Component Description: Project

Management Fees

Amount: \$557.75

	Component Description: Amount:	Technical, Consultation and Planning Services. Three conference calls. \$75.00
	Component Description: Amount:	Project Management Fees \$684.20
Additional Field Engineering Service, 8 Days	Information not provided.	
RF Exposure Measurements	Information not provided.	
Comprehensive coverage verification via field study, if needed	Information not provided.	
Attorney Fees - Negotiation of lease and other matters for shared locations	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	preparation of engineering portion of initial FCC Application for Construction Permit for repack facility. \$2,075.00
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Perform engineering study for new channel assignment and antenna development	Component Description: Amount:	Interference study of repack Channel; preparation of engineering portion of initial FCC Application for Construction Permit for repack facility. \$4,150.00
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.	
Prepare and or review reimbursement form	Component Description: Amount:	Budget Review /Form Prep \$110.25
	Component Description: Amount:	Budget Review /Form Prep \$535.35
	Component Description: Amount:	Budget Review /Form Prep \$459.60

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	\$77,495.00	\$76,895.00		\$0.00	
Non-zoning permits	\$2,500.00	\$2,500.00	N/A	N/A	N/A
Local Zoning	\$5,000.00	\$5,000.00	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 - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A
Vehicle Rentals	\$5,000.00	\$5,000.00	N/A	N/A	N/A
MVPD Notification of Channel Change	\$2,000.00	\$2,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$15,000.00	\$15,000.00	N/A	N/A	N/A
Equipment Storage	\$10,000.00	\$10,000.00	N/A	N/A	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
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$15,000.00	\$15,000.00	N/A	N/A	N/A
Sub-total	\$77,495.00	\$76,895.00	N/A	\$0.00	N/A
Total for all systems	\$1,079,875.00	\$1,032,550.00	N/A	\$20,811.80	N/A

Components

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,079,875.00	\$1,032,550.00	\$20,811.80

Reimbursem	envestiatus	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. Christine Meng Certifier

11/15/2018

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. Christine Meng Certifier

11/15/2018

Attachments