

Federal Communications Commission

tions	REFERENCE COPY - Not for submission)						
	FCC	Form	399:				
	Reim	burse	ment Re	ques	t		
	Facility	167838	Service: DCA	Call	KMMD-CD	Channel:	
	ID:			Sign:			
	28 (UHF	File	00000281	53			
		Numbe	er:				
	FRN: 001	4625362	Date	06/19			
			Submitted:	/2019			

Applicant Name, Type, and Contact Information

Information

Applicant	Address	Phone	Email	Applicant Type
CABALLERO ACQUISITION LLC Doing Business As: CABALLERO ACQUISITION LLC	Randy Nonberg 15200 Sunset Blvd Suite 202 PACIFIC PALISADES, CA 90272 United States	+1 (310) 573- 1600	randynonberg@cnzcommunications. com	Limited Liability Company

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Preparer Contact Name and Information

Contact Information	Applicant	Address	Phone	Email
	Robert Wayne Jordan , Jordan . Engineer ACME RF INC	Robert Wayne Jordan 9851 CENTER DRIVE VILLA PARK, CA 92861 United States	+1 (714) 412- 1951	rjordan@acmerf. com

Broadcaster	Question	Response
Information and Transition Plan	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 station will remove and replace equipment as required to accomplish the repack. The station will remain off the air while the work is being completed.

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

Primary	Existing Transmitter Information				
Fransmitter	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	ARK 1		
		Year	1990		
		Туре	Solid State		
		Solid State Cooling	Air Cooled		
		Solid State Power Capacity	1 kW		

Existing Transmitter Information

Primary	New Transmitter Costs					
Transmitter	Section	Question	Response			
	New Transmitter	Use	Primary (Main)			
		Change Type	Purchase New			
		Is this a request for upgraded equipment?	No			
		Manufacturer				
		Model	TMU9-3 1.8 kW			
		Transmitter Type	Solid State			
		Solid State Cooling	Air Cooled			
		Solid State Power capacity	1.8 kW			
		Justification for New Transmitter	Existing TX is not supported by the manufacture			

Primary Other Transmitter Costs

Transmitter	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	No
		Size	N/A
		Length	N/A
		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

PrimaryOther Transmitter Cost Not ListedTransmitterInformation not provided.

Antennas Section		Question	Response
Antenna Rela	ated Expenses	Do you have antenna related expenses?	Yes

Primary	Existing Antenna Information					
Primary Antenna	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	PSILP8AER
 Year	1990

Primary	New Antenna Costs						
Antenna	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?	Yes				
		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				
Manufactur	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)	15.0 kW				
		Manufacturer					
			1				

Model	ALP8L3- ESR-28
Year	2018
Justification for New Antenna	Existing antenna will not serve new channel assignment

Primary	Other Antenna Costs					
Antenna	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			

Primary Other Antenna Cost Not Listed

Antenna Information not provided.

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

Tower	Section	Question	Response
Equipment And Rigging	Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	Yes
Costs			

Primary	Existing Tower			
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?	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?	Unknown	
	Existing Tower Structure	Do you have a tower registration number?	Yes	
	Registration	ASR Number	1051048	
	Coordinates (NAD83 (North American Datum of	Latitude (NAD83)	36° 32' 05.0" N-	
	1983))	Longitude (NAD83)	121° 37' 12.7" W-	

Overall Structure Height	168.96 feet
Support Structure Height	161.74 feet
Ground Elevation Above Mean Sea Level (AMSL)	3379.88 fee
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	American Tower, Inc.
Date Constructed	10/09/1997

Tower Modification Costs Primary

Tower	Section	Question	Response
	Engineering Study	Please what type of engineering study is required, if any:	Study needed for documented tower
	Tower Reinforcements	Please select whether tower reinforcements are needed:	No reinforcements needed

Tower Rigging Costs Primary

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Tower	

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

Other Tower Expenses Not Listed Primary

Tower Information not provided.

Outside	Section	Question	Response
Professional	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	200
		Explanation	Station does not have staff or experience able to support this project
	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	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Other Professional Services Expenses Not Listed Professional Services roopstsided.

Other	Section	Question	Response
Expenses	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?	No
	Permit and Filing Costs	Local Zoning	Yes
		Non-zoning permits	Yes
		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?	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.

Transmitters

Cost Information

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 TMU9-3 1.8 kW	\$140,400.00	\$134,050.00		\$102,641.37	
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$120,000.00	N/A	\$102,641.37	N/A
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$14,050.00	N/A	N/A	N/A
Sub-total	\$140,400.00	\$134,050.00	N/A	\$102,641.37	N/A
Total for all systems	\$343,520.00	\$327,700.00	N/A	\$233,171.57	N/A

Actual Information	
Description	File Name

UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	Component Description: Amount:	Final payment for transmitter. \$57,412.50
	Component Description:	Sales tax for the transmitter.
	Amount:	\$5,816.37
	Component Description: Amount:	SJ Ramer invoice 19010 billing KMMD for transmitter installation services. \$20,275.00
	Component Description: Amount:	Rohde & Schwarz invoice 9500084961 dated 09Aug2018 including Quote 114987.1 and purchase order. \$19,137.50
Service entrance 3 phase /800 amp/208 volt	Information not provided.	¢ 10,101.00

Antennas

Cost Information

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 ALP8L3- ESR-28	\$33,030.00	\$31,400.00		\$24,542.70	
UHF - Lower Power Side Mount, Class A One Station antenna basic	\$26,300.00	\$25,000.00	N/A	\$24,542.70	The antenna is an upgrade in equipment. Purchaser will pay for the amount over the estimated cost of the antenna.
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	\$24,542.70	N/A
Total for all systems	\$343,520.00	\$327,700.00	N/A	\$233,171.57	N/A

Actual Information Description	File Name
UHF - Lower Power Side Mount, Class A One Station antenna basic	

Component Description:	Additional 30% payment after receipt of order for KMMD repack transmission line system. \$944.04
Component Description:	ERI Invoice KMMD- 001C billing the balance of the cost of comparable antenna, including cover memo explaining that the total requested amount (prior FCC reimbursement plus amount of invoice KMMD- 001C) is the total cost of comparable antenna.
Amount:	\$11,183.31
Component Description:	ERI invoice billing KMMD repack for the 30% of transmission line cost before shipment and freight cost. \$2,319.94
Component Description: Amount:	Final billing for the transmission line system. \$314.68

	Component Description:	ERI Invoice KMMD- 001 including a letter from the Engineer. Although total cost of ERI antenna is over the estimated cost, the request for reimbursement will not go over the estimated cost. Purchaser will pay for the difference in cost. \$8,836.69
	Component Description:	Deposit for order of transmission line system. \$944.04
Sweep test of existing	Information not provided.	\$ 344 .04
antenna		

Cost Transmission Line

Information Information not provided.

Tower Equipment and Rigging Costs

Cost Information

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 Actu	Actual Cos al Cost Justificatio	
Primary Tower TOWER	\$96,800.00	\$92,000.00	\$75	,975.00	
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A \$10	,475.00 N/A	
Short Tower (less than 500')	\$84,200.00	\$80,000.00	N/A \$65	,500.00 N/A	
Sub-total	\$96,800.00	\$92,000.00	N/A \$75	,975.00 N/A	
Total for all systems	\$343,520.00	\$327,700.00	N/A \$233	3,171.57 N/A	

Actual Information Description	File Name	
Structural engineering tower load study for well documented tower	Component Description:	American Tower broadcast
	Amount:	structural invoice. \$10,475.00

Short Tower (less than 500')		
	Component Description:	ACME RF Inc invoice billing KMMD for tower equipment and rigging. Submitted invoice also includes ACME RF Inc Quote No. 544 dated 01Jan2018.
	Amount:	\$40,500.00
	Component Description:	American Tower invoice 460209588 dated 08Feb2019 with description of work done for the KMMD repack.
	Amount:	\$2,500.00
	Component Description:	Final billing for tower equipment and rigging. Balance of installation and removal. Work complete.
	Amount:	\$22,500.00

Outside Professional Services

Cost Information

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	\$60,790.00	\$57,750.00		\$28,012.50	
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
Project management of the transition	\$31,600.00	\$30,000.00	N/A	\$24,600.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$525.00	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	\$0.00	N/A

Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$1,312.50	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$1,050.00	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	\$525.00	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
Sub-total	\$60,790.00	\$57,750.00	N/A	\$28,012.50	N/A
Total for all systems	\$343,520.00	\$327,700.00	N/A	\$233,171.57	N/A

Actual Information Description	File Name
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.	
Project management of the transition	Component Description:	Repack project management services: research and coordination with engineering, attorney, equipment vendors and site
	Amount:	owner. \$1,500.00
	Component Description:	Repack project management services including research and coordination w/rf engineering, attorney and vendors and site owners.
	Amount:	\$9,600.00
	Component Description:	Repack project management for January 1 to January 31, 2019
	Amount:	\$1,500.00
	Component Description:	Repack project management services: research and coordination with engineering, attorney, equipment
		vendors and site owner.

Component Description:	ACME RF invoice billing KMMD for project management services: research and coordination w /engineers, attorney, vendors and site owner. \$3,000.00
Component Description:	Repack project management services. Research and coordinate with engineers, attorney, equipment vendors and site owner. \$2,250.00
Component Description:	ACME RF invoice 1494 billing for repack project management services, research and coordination with engineer, attorney, vendors and owner. \$1,500.00
Component Description: Amount:	Repack project management services. \$1,500.00

Component Description	n: Repack project management services. Research and coordination with engineers, attorney, equipment vendors and site owner.
Amount:	\$1,500.00
e and or review sement form Component Description Amount:	n: Engineering repack services: Qtr 4 2018 report and updated form 399 for revised antenna model and description. \$525.00
s transition timing Information not provided.	·
s transition timing Information not provide ordination issues w/ ations and wireless	ed

Perform engineering study for new channel assignment and antenna development	Component Description:	Engineering services: quote and review for R&S transmitter and ERI antenna.
	Amount:	\$700.00
	Component Description:	Engineering repack services; quarterly progress report submittal.
	Amount:	\$87.50
	Component Description:	Repack engineering quarterly report.
	Amount:	\$87.50
	Component Description:	Engineering services through August 1, 2018.
	Amount:	\$262.50
	Component Description:	Repack engineering services; quarterly progress report.
	Amount:	\$175.00

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description:	Engineering services to prepare construction permit, assist with 399 preparation and review for repacked channel. \$525.00
	Component Description: Amount:	Engineering services to prepare channel repack plan and construction permit exhibits. \$525.00
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Component Description:	Repack engineering services from 2/2 /19 to 3/31/19; 10- week progress report. License to cover application creation. \$525.00
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.	

Other Expenses

Cost Information

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	\$12,500.00	\$12,500.00		\$2,000.00	
Local Zoning	\$2,000.00	\$2,000.00	N/A	N/A	N/A
Non-zoning permits	\$2,000.00	\$2,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$2,000.00	\$2,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$2,000.00	\$2,000.00	N/A	N/A	N/A
Equipment Storage	\$2,000.00	\$2,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$2,500.00	\$2,500.00	N/A	\$2,000.00	N/A
Sub-total	\$12,500.00	\$12,500.00	N/A	\$2,000.00	N/A
Total for all systems	\$343,520.00	\$327,700.00	N/A	\$233,171.57	N/A

Actual Information Description File Name	
Local Zoning	Information not provided.

	Information not provided.	
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.	
Equipment Delivery and Handling Charges	Information not provided.	
Equipment Storage	Information not provided.	
Develop and air announcement of upcoming channel change	Component Description:	Create a custom database to be used to create documents required to notify establishments that offer medical services of upcoming

Cost Information	Grand Total			
		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$343,520.00	\$327,700.00	\$233,171.57

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

Certification	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.	
		 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. 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).
- 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 above- named applicant for the Authorization(s) specified above.	Randy E Nonberg <i>Manager</i> 06/19/2019

Certification	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).	
		 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. 	
		2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.	
		3. 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).
- 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.	
an au name	are, under penalty of perjury, that I am thorized representative of the above- d applicant for the Authorization(s) ried above.	Randy E Nonberg <i>Manager</i> 06/19/2019

Attachments