



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **48836** | Service: **DCA** | Call **KXLK-CD** | Channel: **14 (UHF)** |
ID: | Sign:
File **0000027623**
Number:
FRN: **0020907150** | Date **07/04**
Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
UNIVISION LOCAL MEDIA, INC.	CHRISTOPHER G. WOOD	+1 (310)	cwood@univision.net	Corporation
Doing Business As:	5999 CENTER DRIVE	348-3600		
UNIVISION LOCAL MEDIA, INC.	LOS ANGELES, CA 90045			
	United States			

Reimbursement Contact Information

Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Information

Preparer Contact Name and Information

Applicant	Address	Phone	Email
Theodore Stoner	Theodore Stoner	+1 (513) 608-	tstoner@univision.net
<i>VP Distribution Technology Strategy</i>	9405 NW 41st Street	0308	
<i>Univision Management Company</i>	Miami, FL 33178		
	United States		

**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	When the CP is issued, we will order a new transmitter, filter, and antenna. When the equipment is received, we will proceed with removing the old equipment and installing the new. See attachment for details.

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 and Type	Manufacturer	
	Model	NV7640V
	Year	2008
	Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power Capacity	6.4 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	THU9-4 Evo
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	6.5 kW
	Justification for New Transmitter	Old Rohde and Schwarz NV7640V transmitter is not supported for repackaging and they will not support the transmitter for retuning.

**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	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Type	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 leasehold 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**
Information not provided.

Antennas

Section	Question	Response
Antenna Related Expenses	Do you have antenna related expenses?	Yes

Primary Antenna

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	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?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna Manufacturer and Type	Class	Class A
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	Type	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	AL12-23-PLC
Year	2008

Primary
Antenna

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?	No
	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	Circular
	Type	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	

Model	AL12-24-PLC
Year	2017
Justification for New Antenna	The AL12-23-PLC we currently have is not broadband enough to move to CH14. The VSWR would increase and the beam tilt would change. Retuning the old antenna would be cost prohibitive.

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
	Type	
	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 transmission line and antenna?	Yes

**Primary
Antenna**

Other Antenna Cost Not Listed

Information not provided.

Transmission Line

Section	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	Move Equipment
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Is this tower consider Complex?	Candelabra
	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	No
	Is tower documented for structural analysis?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1013180
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	30° 19' 23.8" N-
	Longitude (NAD83)	097° 47' 59.5" W-
	Overall Structure Height	1228.99 feet

Support Structure Height	1151.89 feet
Ground Elevation Above Mean Sea Level (AMSL)	817.90 feet
Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	American Towers, LLC
Date Constructed	10/08/1997

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

Facility ID	Call Sign	Service
35849	KASE-FM	FM
3222	KFMK	FM
19223	KVLR	FM
48651	KAMX	FM
62048	KVET-FM	FM
66489	KKMJ-FM	FM
8685	KMFA	FM

**Primary
Tower**

Tower Rigging Costs

Section	Question	Response
Tower Rigging Costs	Complex Tower	Candelabra
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?	Yes
	Number of Hours	595
	Explanation	Please see attached quote from Widelity.
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 Services	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No

	For Main Facility	Yes
	Prepare request for Special Temporary Authority	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	No
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	Yes
	Number of Days	3
	Justification	Oversee installation of antennas, filter, and transmitter. Configure encoder for new channel.

Outside Professional Services Costs **Other Professional Services Expenses Not Listed**

None were provided.

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)?	No
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
	Does this relocation require Equipment Storage?	No
	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

Other Expenses Not Listed

Name		Description
Filter		Replacement filter for CH24

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 THU9-4 Evo	\$230,790.00	\$230,790.00		\$146,763.50	
UHF - Air Cooled Solid State Transmitter 6.5 kW	<i>\$230,790.00</i>	\$230,790.00	Please see R&S Quote 127742.2	\$146,763.50	N/A
Sub-total	\$230,790.00	\$230,790.00	N/A	\$146,763.50	N/A
Total for all systems	\$836,575.00	\$796,240.00	N/A	\$198,074.70	N/A

Components

Actual Information Description	File Name
UHF - Air Cooled Solid State Transmitter 6.5 kW	<div><div>Component Description:</div><div>DP Forecast deposit: \$1,000 per transmitter</div><div>Amount:</div><div>\$67,737.00</div></div> <div><div>Component Description:</div><div>35% Due upon FAT PO# Line 1 THU9-4EVO DUAL Drive</div><div>Amount:</div><div>\$79,026.50</div></div>

Cost
Information

Antennas

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna AL12-24-PLC	\$33,030.00	\$19,465.00		\$0.00	
UHF - Lower Power Side Mount, Class A One Station antenna -- basic	\$26,300.00	\$13,065.00	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	\$19,465.00	N/A	\$0.00	N/A
Total for all systems	\$836,575.00	\$796,240.00	N/A	\$198,074.70	N/A

Components

Information not provided.

Cost Information

Transmission Line

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 GTOWER	\$421,000.00	\$400,000.00		\$0.00	
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$400,000.00	N/A	N/A	N/A
Sub-total	\$421,000.00	\$400,000.00	N/A	\$0.00	N/A
Total for all systems	\$836,575.00	\$796,240.00	N/A	\$198,074.70	N/A

Components

Actual Information	
Description	File Name

Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	Component Description:	"BROADCAST STRUCTURAL - AUSTIN - A / 7000 / 7000 / 12058127 / 12634110 / FID: 48836 / ASRN : 1013180 / KXLK- CD Channel 14 / BROADCAST REPACK"
	Amount:	\$19,000.00

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	\$124,590.00	\$128,425.00		\$30,311.20	
Additional Field Engineering Service, 3 Days	<i>\$2,500.00</i>	\$2,500.00	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
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	N/A	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	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
Project management of the transition	\$94,010.00	\$99,675.00	Please see attached quote from Widelity.	\$27,273.70	N/A
Prepare and or review reimbursement form	\$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	\$7,000.00	N/A	\$3,037.50	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
Sub-total	\$124,590.00	\$128,425.00	N/A	\$30,311.20	N/A
Total for all systems	\$836,575.00	\$796,240.00	N/A	\$198,074.70	N/A

Components

Actual Information	
Description	File Name
Additional Field Engineering Service, 3 Days	Information not provided.

Attorney Fees - Prepare and File request for Special Temporary Authorization	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	Information not provided.																				
Prepare request for Special Temporary Authorization	Information not provided.																				
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.																				
Project management of the transition	<table> <tr> <td>Component Description:</td><td>Project Management</td></tr> <tr> <td>Amount:</td><td>\$2,356.85</td></tr> <tr> <td>Component Description:</td><td>Project Management</td></tr> <tr> <td>Amount:</td><td>\$2,231.70</td></tr> <tr> <td>Component Description:</td><td>Project management</td></tr> <tr> <td>Amount:</td><td>\$2,617.55</td></tr> <tr> <td>Component Description:</td><td>Project Management</td></tr> <tr> <td>Amount:</td><td>\$1,829.40</td></tr> <tr> <td>Component Description:</td><td>Project management Services</td></tr> <tr> <td>Amount:</td><td>\$480.00</td></tr> </table>	Component Description:	Project Management	Amount:	\$2,356.85	Component Description:	Project Management	Amount:	\$2,231.70	Component Description:	Project management	Amount:	\$2,617.55	Component Description:	Project Management	Amount:	\$1,829.40	Component Description:	Project management Services	Amount:	\$480.00
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Component Description:	Project Management																				
Amount:	\$1,829.40																				
Component Description:	Project management Services																				
Amount:	\$480.00																				

Component Description:	Cost Reconciliation
Amount:	\$3,315.20

Component Description:	K. Lahm - Alternative antenna & site/tower analysis
Amount:	\$750.00

Component Description:	K. Lahm - Alternate site population & structural analysis review - 3/10/2019
Amount:	\$375.00

Component Description:	K. Lahm - Alternative tower structural analysis
Amount:	\$75.00

Component Description:	Project management Services
Amount:	\$275.00

Component Description:	Project management services
Amount:	\$283.40

Component Description:	Project management Services
Amount:	\$337.35

Component Description:	Project management Services
Amount:	\$367.25

Component Description:	Project management Services
Amount:	\$219.70

Component Description:	Project management services
Amount:	\$75.00

Component Description:	Project management services
Amount:	\$147.00

Component Description:	Project Management
Amount:	\$33.00

Component Description:	Project management services
Amount:	\$21.00

Component Description:	Project management services
Amount:	\$403.50

Component Description:	Project management services
Amount:	\$88.50

Component Description:	Project Management
Amount:	\$75.00

Component Description:	Project management services
Amount:	\$397.50

Component Description:	Project Management
Amount:	\$2,112.00

Component Description:	Project management services
Amount:	\$49.50

Component Description:	Project Management
Amount:	\$1,237.30

Component Description:	Project Management
Amount:	\$2,242.50

Component Description:	Project Management
Amount:	\$2,727.80

Component Description:	Project Management
Amount:	\$4,124.60

Component Description:	Project Management
Amount:	\$1,483.60

Prepare and or review reimbursement form	Information not provided.
Perform engineering study for new channel assignment and antenna development	<div> <div> Component Description: </div> <div> KXLK-CD-530-RF Eng - Engineering Study for New Channel Assignment </div> </div> <div> <div> Amount: </div> <div> \$750.00 </div> </div> <div> <div> Component Description: </div> <div> prepare implementation plan, aperture & alternative antenna evaluations </div> </div> <div> <div> Amount: </div> <div> \$375.00 </div> </div> <div> <div> Component Description: </div> <div> Network analysis of KXLK transmission line and antenna. Work performed by Peter Eckmann </div> </div> <div> <div> Amount: </div> <div> \$1,750.00 </div> </div> <div> <div> Component Description: </div> <div> Antenna aperture planning, Alternative antenna evaluation </div> </div> <div> <div> Amount: </div> <div> \$162.50 </div> </div>
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	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	\$27,165.00	\$17,560.00		\$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
Develop and air announcement of upcoming channel change	<i>\$100.00</i>	\$100.00	N/A	N/A	N/A
Filter	<i>\$13,875.00</i>	\$13,875.00	N/A	N/A	N/A
Sub-total	\$27,165.00	\$17,560.00	N/A	\$0.00	N/A
Total for all systems	\$836,575.00	\$796,240.00	N/A	\$198,074.70	N/A

Components

Actual Information	
Description	File Name
DTV Medical Facility Notification	<div> <div>Component Description:</div> <div>Medical Notification Mailing</div> <div>Amount:</div> <div>\$2,000.00</div> </div>
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	Information not provided.
FCC Filing Fees - Special Temporary Authorization request	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.
Filter	Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$836,575.00	\$796,240.00
			\$198,074.70

Reimbursement Status	Question	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	<p>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.</p>	
		<ol style="list-style-type: none"> 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.

<p>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.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p>Marcello Enriquez <i>Senior Finance Analyst</i></p> <p>07/04/2019</p>

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 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 AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).	
		<ol style="list-style-type: none"> 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. 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) .
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.

<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>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.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p>Marcello Enriquez <i>Senior Finance Analyst</i></p> <p>07/04/2019</p>

Attachments