

Federal Communications Commission

#### (REFERENCE COPY - Not for submission)

### FCC Form 399: Reimbursement Request

Facility	42121	Service: DTV	Call	WMBD-TV	Channel: 26 (UHF)
ID:	I		Sign:		
File	000002	8527			
Number:					
FRN: <b>00</b>	09961889	Date	08/24		
		Submitted:	/2017		

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

#### Applicant Information

Applicant	Address	Phone	Email	Applicant Type
NEXSTAR BROADCASTING, INC.	Elizabeth Ryder 545 E. JOHN CARPENTER FREEWAY SUITE 700 IRVING, TX 75062 United States	+1 (972) 373- 8800	eryder@nexstar. tv	Corporation

#### Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

#### **Preparer Contact Name and Information** Preparer Contact Applicant Address Phone Email Information **Elizabeth Ryder** Elizabeth Ryder +1 (972) 373eryder@nexstar. General Counsel 545 E. John Carpenter 8800 tv Nexstar Broadcasting, Freeway Inc. Suite 700 Irving, TX 75062 **United States**

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	Replace transmitter and antenna using existing line. Acquire interim antenna and line for continued operation during construction and duration of the assigned phase. Map and analyze tower; design and implement modifications if required. See attached.

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

Primary	Existing Transmitter Infor	ormation		
Transmitter	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	QX2	
		Year	2007	
		Туре	Inductive Output Tube	
		IOT Power Type	Single	
		Power Capacity	28 kW	

### **Existing Transmitter Information**

Primary	New Transmitter Costs		
Transmitter	Section	Question	Response
	New Transmitter Use	Use	Primary (Main)
		Change Type	Purchase New
		Is this a request for upgraded equipment?	Yes
		Manufacturer	
		Model	THU9EVO- 20
		Transmitter Type	Solid State
		Solid State Cooling	Liquid Cooled
		Solid State Power capacity	31 kW
		Justification for New Transmitter	The manufacturer of the existing IOT transmitter advises that the transmitter cannot be retuned to the assigned channel. We plan to upgrade to a SS. See attachment. We understand the FCC will reimburse only to a maximum price of the replacement IOT.

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	3 inches		
	Length	100.0 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 N/A 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		
	Section Electrical Service HVAC Service Transmitter Building Addition/Modification or Leasehold Improvement	SectionQuestionElectrical ServiceService Entrance (3 phases 800A 208V)Switchgear (industrial 800 amp)Transformer (480V)PowerRigid Conduit and WiringSizeLengthOther Electrical ServiceDescriptionHVAC ServiceTypeSizeSizeCother SizeOther SizeTypeSize		

Primary	Other Transmitter Cost Not Listed	
Transmitter	Name	Description
	Additional Interior RF System	Interior RF System Existing Transmitter to Interim Transmission line

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

Primary	Existing Antenna Inform	a Information	
Antenna	Section Existing Antenna Description	Question	Response
		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
	Existing Antenna	Is antenna located on or in close proximity to an antenna farm?	No
		Class	Full Power
	Manufacturer and Type	Mounting	Top 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)	800.0 kW

Manufacturer	
Model	TFU- 30GTH-R 6T170 DC
Year	2007

rimary Intenna	Section	Question	Response
	New Antenna Description	Use	Primary (Main
		Description of Use	N/A
		Change Type	Purchase Nev
		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 Manufacturer and Types	Class	Full Power
		Mounting	Top Mount
		Antenna position in stack	Not in Stack
		Polarization	Horizontal
		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)	822.0 kW
		Manufacturer	
		Model	TBD
		Year	2018

ustification for New Antenna

# 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?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	7 3/16 inches inches
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

PrimaryOther Antenna Cost Not ListedAntennaInformation not provided.

Interim	New Antenna Costs					
Antenna	Section	Question	Response			
	New Antenna Description	Use	Interim			
		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?	No			
	New Antenna Manufacturer and Type	Class	Full Power			
		Mounting	Side Mount			
		Antenna position in stack	Not in Stack			
		Polarization	Horizontal			
		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)	800.0 kW			
		Manufacturer				
		Model	TBD			
		Year	2018			
			I			

Justification for New Antenna	An interim
	antenna is
	necessary
	to keep
	station on
	the air
	during
	primary
	antenna
	replacemen
	and for the
	duration of
	the
	assigned
	phase.
	Station will
	attempt to
	rent if
	renting is
	available at
	time of
	acquisition.

#### С Interim

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Section	Question	Response
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	S
	Feed Line Size	7 3/16 inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for an antenna?	Yes
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

# Interim Other Antenna Cost Not Listed

Antenna Information not provided.

Transmissior	n Seffien	Question	Response
	Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

## Existing Transmission Line Primary Existing Transmission

sior	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	Dielectric
	ine Manufacturer and ype	Туре	Rigid
		Diameter	7 3/16 inches
		Other Diameter	N/A
		Segment Length	20 inches
		Other Segment Length	N/A
		Number of parallel runs	1
		Length	570 feet per run

### Primary Other Transmission Line Expenses Not Listed

Transmission	n Line	Description
	Sweep Tests	Sweep tests to conform operation on assigned channel

#### New Transmission Line

Interim Transmission

Question	Response
Use	Interim
Description of Use	N/A
Change Type	Purchase New
Туре	Flexible Air
Diameter	5 inches
Segment Length	N/A
Other Segment Length	
Number of parallel runs	1
Length	410 feet per run
	UseDescription of UseChange TypeTypeDiameterSegment LengthOther Segment LengthNumber of parallel runs

Justification for New Transmission Line

Other Transmission Line Expenses Not Listed Transmission

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

Primary	Existing	Tower

Primary			
Tower	Section	Question	Response
	Existing Tower Description	Type of change	Modify Existing
		Tower Use	Primary (Main)
		Description of Use	N/A
		Ownership	Owned
		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)	Yes
		Others Types of Users	Yes
		Is tower documented for structural analysis?	No
		Is tower compliant with Rev G?	No
	Existing Tower Structure	Do you have a tower registration number?	Yes
	Registration	ASR Number	1016047
	Coordinates ( <u>NAD83</u> ( North American Datum of 1983))	Latitude (NAD83)	40° 38' 06.0" N-
		Longitude (NAD83)	089° 32' 19.0" W-
		Overall Structure Height	550.85 feet
		Support Structure Height	492.78 feet
		Ground Elevation Above Mean Sea Level (AMSL)	740.15 feet
			,

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Nexstar Broadcasting, Inc.
Date Constructed	11/17/1976

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
42114	WPBG	FM

#### Other Types of Users

Users

WMBD mwave

WPBG mwave

# Primary Tower Modification Costs

#### Tower

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:	Major 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	

### Other Tower Expenses Not Listed

PrimaryOther Tower ExpenseTowerInformation not provided.

Outside Professional	Section	Question	Response
	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	291
		Explanation	Schedule and coordinate multiple vendors, complete progress reports, and update Schedule 399. Station does not have available personnel or personnel or personnel trained in project management for such complex projects. Internal accounting and Project management.
	Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
		Prepare engineering section of Form FCC Construction Permit Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes
		Prepare engineering section of Form FCC License to Cover Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes

	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting	Prepare and file Form FCC Construction Permit Application	Yes
Services	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	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	Yes
Number of Days	17
Justification	It will be necessary to survey the site, plan the equipment, develop specifications for purchasing, and oversee multiple vendor RF projects. Station does not have available personnel or personnel trained in such services.

Other Professional Services Expenses Not Listed Professional Services rCostsided.

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?	Yes
	Permit and Filing Costs	Local Zoning	No
		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?	Yes

Other	Other Expenses Not Listed	
Expenses	Name	Description
	Sales Tax	Sales and use tax on goods and services

#### 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 THU9EVO-20	\$1,155,950.00	\$1,071,051.00		\$0.00	
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$865,551.00	Maximum price for reimbursement for a one tube IOT. See attached.	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
Additional Interior RF System	\$140,000.00	\$140,000.00	N/A	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$4,900.00	N/A	N/A	N/A
Sub-total	\$1,155,950.00	\$1,071,051.00	N/A	\$0.00	N/A
Total for all systems	\$2,756,638.00	\$2,616,551.00	N/A	\$0.00	N/A

#### Components

#### 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
Interim Antenna TBD	\$229,040.00	\$226,600.00		\$0.00	
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$22,000.00	N/A	N/A	N/A
Elbow complex, single channel, at antenna input, per 7 3 /16. feedline (if needed)	\$13,900.00	\$13,200.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - High Power, Side Mount, basic slot antenna, 800 kW input, directional,, horizontally polarized	\$180,000.00	\$180,000.00	N/A	N/A	N/A
Primary Antenna TBD	\$267,630.00	\$254,600.00		\$0.00	

Elbow complex, single channel, at antenna input, per 7 3 /16. feedline (if needed)	\$13,900.00	\$13,200.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - High Power Top Mount (200- 1000 kW), One station antenna, horizontally polarized	\$247,000.00	\$235,000.00	N/A	N/A	N/A
Sub-total	\$496,670.00	\$481,200.00	N/A	\$0.00	N/A
Total for all systems	\$2,756,638.00	\$2,616,551.00	N/A	\$0.00	N/A

#### Components

#### **Transmission Line**

#### 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
Interim Transmission Line	\$43,050.00	\$41,000.00		\$0.00	
Flexible Air Transmission Line - dielectric, 5"	\$43,050.00	\$41,000.00	N/A	N/A	N/A
Primary Transmission Line	\$6,400.00	\$6,400.00		\$0.00	
Sweep Tests	\$6,400.00	\$6,400.00	N/A	N/A	N/A
Sub-total	\$49,450.00	\$47,400.00	N/A	\$0.00	N/A
Total for all systems	\$2,756,638.00	\$2,616,551.00	N/A	\$0.00	N/A

#### Components

#### **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		Actual Cost Justification
Primary Tower TOWER	\$657,800.00	\$625,000.00		\$0.00	
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
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	N/A	N/A
Major tower reinforcement /modifications	\$421,000.00	\$400,000.00	N/A	N/A	N/A
Sub-total	\$657,800.00	\$625,000.00	N/A	\$0.00	N/A
Total for all systems	\$2,756,638.00	\$2,616,551.00	N/A	\$0.00	N/A

#### Components

#### **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	\$111,218.00	\$106,900.00		\$0.00	
Additional Field Engineering Service, 17 Days	\$34,000.00	\$34,000.00	N/A	N/A	N/A
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$2,000.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	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	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
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$45,978.00	\$43,650.00	N/A	N/A	N/A
Sub-total	\$111,218.00	\$106,900.00	N/A	\$0.00	N/A
Total for all	\$2,756,638.00	\$2,616,551.00	N/A	\$0.00	N/A

### Components

#### **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	\$285,550.00	\$285,000.00		\$0.00	
Sales Tax	\$183,500.00	\$183,500.00	Sales and use tax of 8.25% applied to transmitters, antennas, transmission line and tower costs.	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	\$1,500.00	\$1,500.00	N/A	N/A	N/A
Equipment Storage	\$16,000.00	\$16,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$30,000.00	\$30,000.00	N/A	N/A	N/A
Non-zoning permits	\$25,000.00	\$25,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A

Disposal Costs (for equipment and other waste, net of any salvage value)	\$16,000.00	\$16,000.00	N/A	N/A	N/A
Sub-total	\$285,550.00	\$285,000.00	N/A	\$0.00	N/A
Total for all systems	\$2,756,638.00	\$2,616,551.00	N/A	\$0.00	N/A

### Components

Cost	Grand Total					
Information		Predetermined Cost Estimate	Estimated Cost	Actual Cost		
	Total for all systems	\$2,756,638.00	\$2,616,551.00	\$0.00		

Reimbursem	entestatus	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.	
		<ol> <li>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.</li> <li>The above-named</li> </ol>	
		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.	Elizabeth Ryder General Counsel
	08/24/2017

#### Attachments