



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **70536** | Service: **DTV** | Call **WSEC** | Channel: **18 (UHF)** |
ID: | Sign:
File **0000027251**
Number:
FRN: **0005941323** | Date **11/16**
Submitted: **/2017**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
WEST CENTRAL ILLINOIS EDUCATIONAL TELECOMMUNICATIONS CORP. Doing Business As: WMEC TV	Jerold Gruebel PO Box 62708 Springfield, IL 62708 United States	+1 (217) 483- 7887	jgruebel@wsec. tv	Not-for- Profit

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
The Preparer is same as the reimbursement contact.			

Broadcaster Information and Transition Plan

Question	Response
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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	WSEC will be changing channel with a minimal amount of interruption to viewers. Purchasing new transmitter, mask filter & broadcast antenna plus required associated modules and components.

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	DCD20PL1
	Year	2001
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	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	UAXTE-12R44
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	7.2 kW
	Justification for New Transmitter	Existing Harris DiamondCD transmitter is not capable of producing the required TPO in order to achieve an ERP of 80.8 kW as assigned.

**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	Yes
	Size	2 inches
	Length	50.0 feet
	Other Electrical Service	Yes
	Description	Install new circuit breaker(s) as required and install wiring to transmitter's physical location within the building.
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Type	Cooling Only
	Size	10 tons
	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**

Add 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 this antenna currently shared with any other stations?	No
	Is this antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Other
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Other Antenna Type	Slot Antenna - single channel tuned

ERP: (Effective Radiated Power)	75.0 kW
Manufacturer	
Model	TFU- 24GTH-R O4
Year	2002

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?	Yes
	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?	No
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	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)	80.8 kW
	Manufacturer	

Model	TFU-24GTH-R O4
Year	2017
Justification for New Antenna	Existing antenna will not function on the assigned frequency..

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?	No
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?	Yes

Primary
Transmission Line

Existing Transmission 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	
	Type	Rigid
	Diameter	4 1/16 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1050 feet per run

Primary
Transmission Line

New Transmission Line

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
	Type	Rigid
	Diameter	4 1/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	50 feet per run
	Justification for New Transmission Line	Distance from entry point into building to position of new transmitter.

Primary
Transmission Line

Other Transmission Line Expenses Not Listed

Information not 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	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)	No
	Others Types of Users	Yes
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1221865
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	39° 36' 09.2" N-
	Longitude (NAD83)	090° 02' 47.4" W-
	Overall Structure Height	976.04 feet
	Support Structure Height	915.67 feet
	Ground Elevation Above Mean Sea Level (AMSL)	672.89 feet
	Structure Type	TOWER - Free Standing or Guyed Structure

	Tower Owner	West Central Illinois Educational Telecommunications Corporation
	Date Constructed	09/23/2002

Other Types of Users

Users

W40CV-D

Primary Tower

Tower Modification Costs

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:	Minor 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

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	120
	Explanation	Forms review; onsite supervision during transmitter, antenna & tower work; coordination of involved entities in the 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 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	No
	Quantity	N/A
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Professional Services Costs **Other Professional Services Expenses Not Listed**
 Services 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	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 Expenses	Other Expenses Not Listed
	Information not provided.

Cost Information

Transmitters

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmitter UAXTE-12R44	\$286,450.00	\$282,500.00		\$0.00	
10 Ton system	\$38,900.00	\$35,000.00	N/A	N/A	N/A
Other Electrical Service: Install new circuit breaker(s) as required and install wiring to transmitter's physical location within the building.	<i>\$1,250.00</i>	\$1,250.00	N/A	N/A	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$1,300.00	\$1,250.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 7.2 kW	<i>\$245,000.00</i>	\$245,000.00	N/A	N/A	N/A
Sub-total	\$286,450.00	\$282,500.00	N/A	\$0.00	N/A
Total for all systems	\$1,018,525.00	\$977,900.00	N/A	\$8,590.00	N/A

Components

Information not provided.

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 TFU- 24GTH-R O4	\$253,730.00	\$240,400.00		\$0.00	
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	\$234,000.00	N/A	N/A	N/A
Sub-total	\$253,730.00	\$240,400.00	N/A	\$0.00	N/A
Total for all systems	\$1,018,525.00	\$977,900.00	N/A	\$8,590.00	N/A

Components

Information not provided.

Cost
Information

Transmission Line

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmission Line	\$8,150.00	\$7,750.00		\$0.00	
Rigid Transmission Line - copper, 4 1/16" broadband	\$8,150.00	\$7,750.00	N/A	N/A	N/A
Sub-total	\$8,150.00	\$7,750.00	N/A	\$0.00	N/A
Total for all systems	\$1,018,525.00	\$977,900.00	N/A	\$8,590.00	N/A

Components

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 TOWER	\$381,100.00	\$362,000.00		\$3,500.00	
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	\$3,500.00	N/A
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Sub-total	\$381,100.00	\$362,000.00	N/A	\$3,500.00	N/A
Total for all systems	\$1,018,525.00	\$977,900.00	N/A	\$8,590.00	N/A

Components

Actual Information	
Description	File Name
Structural engineering tower load study for well documented tower	<div>Component Description: Structural analysis of WSEC Tower. Reg #1221865 For TIA/EIA 222-G standards. Valmont order #156273-2-1</div> <div>Amount: \$3,500.00</div>

Tall Tower (greater than 500')	Information not provided.
Minor tower reinforcement /modifications	Information not provided.

**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	\$46,045.00	\$43,750.00		\$5,090.00	
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	\$2,416.50	Additional legal counsel required due to problems with 'saving' the 399 schedule without losing tower work dollar amounts. Received numerous errors on "saving & exiting". Required repeated contact with FCC I. T. personnel (Raphael) to rectify.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$431.00	N/A

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$2,242.50	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
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Project management of the transition	\$18,960.00	\$18,000.00	N/A	N/A	N/A
Sub-total	\$46,045.00	\$43,750.00	N/A	\$5,090.00	N/A

Total for all systems	\$1,018,525.00	\$977,900.00	N/A	\$8,590.00	N/A
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Components

Actual Information	
Description	File Name
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Component Description: Legal Counsel - WSEC repack issues July 2017 Amount: \$1,129.00
	Component Description: Legal Counsel - WSEC repack issues June 2017 Amount: \$1,130.50
	Component Description: Legal Counsel - WSEC repack issues September 2017 Amount: \$56.00
	Component Description: Legal Counsel - WSEC repack issues August 2017 Amount: \$101.00
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description: Legal Counsel - WSEC repack issues October 2017 Amount: \$431.00
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	Component Description:		Prepare WSEC engineering section of Form 2100 Construction Permit Application.
	Amount:		\$1,500.00
	Component Description:		WSEC Portion of invoice for planning meeting to discuss assigned frequency for repack
	Amount:		\$742.50
Perform engineering study for new channel assignment and antenna development	Information not provided.		
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.		
Prepare and or review reimbursement form	Information not provided.		
ASR modification (prepare FCC Form 854)	Information not provided.		
Project management of the transition	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	\$43,050.00	\$41,500.00		\$0.00	
Develop and air announcement of upcoming channel change	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
Equipment Storage	<i>\$2,500.00</i>	\$2,500.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$15,000.00</i>	\$15,000.00	Tx @ 5400 Antenna @ 7700 Misc @ 1900	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$4,000.00</i>	\$4,000.00	Antenna, transmitter, packaging materials.	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$10,000.00	N/A	N/A	N/A
MVPD Notification of Channel Change	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
Sub-total	\$43,050.00	\$41,500.00	N/A	\$0.00	N/A
Total for all systems	\$1,018,525.00	\$977,900.00	N/A	\$8,590.00	N/A

Components

Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$1,018,525.00	\$977,900.00
			\$8,590.00

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>Richard Plotkin <i>Project Manager</i></p> <p>11/16/2017</p>

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	<p>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).</p>	
		<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>Richard Plotkin <i>Project Manager</i></p> <p>11/16/2017</p>

Attachments