

(REFERENCE COPY - Not for submission)

## FCC Form 399: Reimbursement Request

Facility 49157 Service: DTV Call WCCB Channel: 18 (UHF)

ID: Sign:

ID: File

0000027054

Number:

FRN: **0003828712** Date **02/23** 

Submitted: /2018

## Applicant Information

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

Applicant	Address	Phone	Email	Applicant Type
NORTH CAROLINA BROADCASTING PARTNERS Doing Business As: NORTH CAROLINA BROADCASTING PARTNERS	Beverly B. Poston ONE TELEVISION PLACE CHARLOTTE, NC 28205 United States	+1 (704) 372- 4434	BPoston@bahakel.com	General Partnership

## Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email	
[Confidential]				

#### Preparer Contact Information

#### **Preparer Contact Name and Information**

Applicant	Address	Phone	Email
M. Anne Swanson Legal Counsel Wilkinson Barker Knauer LLP	M. Anne Swanson 1800 M Street NW Suite 800N Washington, DC 20036 United States	+1 (202) 383- 3342	ASwanson@wbklaw. com

#### Broadcaster Information and Transition Plan

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	No
Briefly describe transition plan	Install new primary transmitter. Re-purpose legacy Ch.18 antenna and transmission line to operate on reassigned channel. See Exhibit A Revised 2-8-18 and WCCB Form 399 Amendment 2-23-18.

#### **Transmitters**

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

## Primary Transmitter

### **Existing Transmitter Information**

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter	Manufacturer	
Manufacturer and Type	Model	DCX-3H (IOX/DCX Product Family)
	Year	2002
	Туре	Inductive Output Tube
	IOT Power Type	Three
	Power Capacity	60 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?	Yes
	Manufacturer	
	Model	HPTV-PRLX- U32
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	55 kW
	Justification for New Transmitter	Manufacturer is not able to re-tune existing transmitter. New transmitter is required to operate on reassigned channel. New transmitter is upgrade to solid state with non-reimbursable cost increase of \$2070.30. See Exhibit B.

#### Primary Transmitter

#### **Other Transmitter Costs**

Section	Question	Response
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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	500.0 feet
	Other Electrical Service	Yes
	Description	Circuit breakers and disconnects for transmitter, pumps, and heat exchangers. Cost estimate is based upon previous projects experience of a similar nature. See Exhibit I.
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

### Primary Transmitter

### **Other Transmitter Cost Not Listed**

Name	Description
Site Design and Survey by Manufacturer	Cost for site design and survey by manufacturer to determine electrical, HVAC, and space considerations for new primary transmitter and RF system. See Exhibit C.(Survey itself is in Exhibit B.)

#### **Antennas**

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

#### **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?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna	Class	Full Power
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)	1000.0 kW

Manufacturer	
Model	TFU- 24DSC-R 3C130
Year	2002

#### **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?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna	Class	Full Power
Manufacturer and Types	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)	1000.0 kW
	Manufacturer	
	Model	TFU-24G

Year	1979
Justification for New Antenna	This is a legacy top mount Ch. 18 antenna which is currently installed on tower. It will be repurposed to operate on reassigned channel. See WCCB Form 399 Amendment 2-23-18.

#### **Other Antenna Costs**

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
	Туре	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No

Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes

#### **Other Antenna Cost Not Listed**

Name	Description
Slot Covers	Replacement slot covers for re-purposed top mount Ch.18 antenna. See Exhibit L.

Transmission Seffien	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	Type of change	Modify Existing
Description	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?	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?	No
Existing Tower	Do you have a tower registration number?	Yes
Structure Registration	ASR Number	1037877
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	35° 16' 02.0" N-
	Longitude (NAD83)	080° 44' 04.0" W-
	Overall Structure Height	1214.55 feet

Support Structure Height	1140.73 feet
Ground Elevation Above Mean Sea Level (AMSL)	779.85 feet
Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	WCCB-TV, Inc.
Date Constructed	01/01/1966

#### 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:	No reinforcements needed

#### Primary Tower

#### **Tower Rigging Costs**

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

#### Primary Tower

#### Other Tower Expenses Not Listed

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	480
	Explanation	Reassigned station does not have sufficient qualified internal personnel for project management. It is estimated that outside project management will be required for 60 days while new antennas, transmission line, and transmitter are installed.
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	Yes
	Quantity	1
	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	No

Number of Days	N/A
Justification	N/A

#### Outside Professional

## Other Professional Services Expenses Not Listed

al Services Costs	Description
WCCB Additional Repack Related Legal Services	Attorneys Fees - Repack requirements (vendor contracts, refinancing, tax, affiliation agreements, equipment selection /justification). See Exhibit H

## 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	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	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)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	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?	Yes

## Other Expenses

### Other Expenses Not Listed

Name	Description
Wireless Microphones	To replace station's wireless microphones that will be displaced because existing channels are eliminated due to repack. See Exhibit F.

## **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 HPTV-PRLX- U32	\$1,823,800.00	\$1,390,773.70		\$15,300.00	
UHF - Liquid Cooled Solid State Transmitter 52 - 61 kW	\$1,788,000.00	\$1,355,473.70	N/A	N/A	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$13,000.00	\$12,500.00	N/A	N/A	N/A
Other Electrical Service: Circuit breakers and disconnects for transmitter, pumps, and heat exchangers. Cost estimate is based upon previous projects experience of a similar nature. See Exhibit I.	\$7,500.00	\$7,500.00	N/A	N/A	N/A

Site Design and Survey by Manufacturer	\$15,300.00	\$15,300.00	N/A	\$15,300.00	N/A
Sub-total	\$1,823,800.00	\$1,390,773.70	N/A	\$15,300.00	N/A
Total for all systems	\$2,513,022.04	\$1,629,990.74	N/A	\$62,666.34	N/A

### Components

Actual Information Description	File Name	
UHF - Liquid Cooled Solid State Transmitter 52 - 61 kW	Information not provided.	
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Other Electrical Service: Circuit breakers and disconnects for transmitter, pumps, and heat exchangers. Cost estimate is based upon previous projects experience of a similar nature. See Exhibit I.	Information not provided.	
Site Design and Survey by Manufacturer	Component Description:	Final payment for Site Survey and
	Amount:	Design. \$13,300.00
	Component Description:	Down payment for Site Survey
	Amount:	and Design. \$2,000.00

## **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-24G	\$263,651.90	\$16,321.90		\$0.00	
Slot Covers	\$9,921.90	\$9,921.90	N/A	N/A	N/A
UHF - High Power Top Mount (200- 1000 kW), One station antenna, horizontally polarized	\$247,000.00	\$0.00	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	\$263,651.90	\$16,321.90	N/A	\$0.00	N/A
Total for all systems	\$2,513,022.04	\$1,629,990.74	N/A	\$62,666.34	N/A

#### Components

Information not provided.

## Cost Transmission Line

**Information** 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	\$223,100.00	\$27,000.00		\$19,100.00	
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	\$19,100.00	See Exhibit K
Tall Tower (greater than 500')	\$210,500.00	\$15,000.00	See Exhibit M	N/A	N/A
Sub-total	\$223,100.00	\$27,000.00	N/A	\$19,100.00	N/A
Total for all systems	\$2,513,022.04	\$1,629,990.74	N/A	\$62,666.34	N/A

#### Components

<b>Actual Information</b>		
Description	File Name	

Structural engineering tower		
load study for well documented tower	<b>Component Description:</b>	WCCB Corrosion
documented tower		Risk Analysis
		Invoice
	Amount:	\$1,250.00
	Component Description:	WCCB Tower
		Wind and Ice
		Analysis
	Amount:	\$1,250.00
	Component Description:	WCCB Tower
		Structural
		Analysis Invoice
	Amount:	\$6,600.00
	Component Description:	WCCB
		Ultrasound
		Testing Invoice
	Amount:	\$4,500.00
	Component Description:	WCCB Utrasonic
		Testing Invoice
	Amount:	\$5,500.00
Tall Tower (greater than 500')	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	\$122,760.00	\$116,750.00		\$28,266.34	
WCCB Additional Repack Related Legal Services	\$12,000.00	\$12,000.00	N/A	\$11,850.90	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	\$168.00	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	\$1,278.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$2,812.50	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	\$12,156.94	See Exhibit J
Project management of the transition	\$75,840.00	\$72,000.00	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
Sub-total	\$122,760.00	\$116,750.00	N/A	\$28,266.34	N/A
Total for all systems	\$2,513,022.04	\$1,629,990.74	N/A	\$62,666.34	N/A

### Components

Actual Information Description	File Name	
WCCB Additional Repack Related Legal Services	Component Description: Amount:	WCCB Post- Auction Repack Legal Services \$2,164.90
	Component Description:  Amount:	WCCB Post- Auction Repack Legal Services \$819.00
	Component Description:	WCCB Post- Auction Repack Legal Services
	Amount:	\$8,867.00
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.	

ASR modification (prepare FCC Form 854)	Component Description:	WCCB Antenna Structure Registration Legal Issues
	Amount:	\$168.00
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	Component Description:	WCCB Construction Permit Legal Issues
	Amount:	\$498.00
	Component Description:	WCCB Construction Permit Legal Issues
	Amount:	\$780.00

Perform engineering study for new channel assignment **Component Description:** WCCB Eng Study and antenna development Invoice \$312.50 Amount: **Component Description:** WCCB Eng Study Invoice Amount: \$1,500.00 **Component Description:** WCCB Eng Study Invoice **Amount:** \$750.00 **Component Description:** WCCB Eng Study Invoice Amount: \$250.00 Address transition timing Information not provided. and coordination issues w/ other stations and wireless

Prepare and or review reimbursement form		
	Component Description:	WCCB Post-
		Auction Repack
	Amount:	Legal Issues \$1,057.44
	Amount:	\$1,037.44
	Component Description:	WCCB Post-
		Auction Repack
		Legal Issues
	Amount:	\$4,038.00
	Component Description:	WCCB Post-
	2 2000	Auction Repack
		Legal Issues
	Amount:	\$1,521.00
	Component Description:	WCCB Post-
		Auction Repack
		Legal Issues
	Amount:	\$4,362.00
	Component Description:	WCCB Post-
	Component Description	Auction Repack
		Legal Issues.
	Amount:	\$1,003.00
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Component Description:	WCCB Post-
		Auction Repack
		Legal Services
	Amount:	\$175.50
Project management of the ransition	Information not provided.	
Prepare request for Special Femporary Authorization	Information not provided.	
Prepare engineering section of FCC Form 2100 (main),	Information not provided.	

Prepare engineering section	Information not provided.
of FCC Form 2100 (main),	
Construction Permit	
Application	

## **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	\$79,710.14	\$79,145.14		\$0.00	
Wireless Microphones	\$10,988.14	\$10,988.14	N/A	N/A	N/A
MVPD  Notification of Channel Change	\$1,000.00	\$1,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$1,000.00	\$1,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$41,642.00	\$41,642.00	See Exhibit B and Form 399 Amendment.	N/A	N/A
Equipment Delivery and Handling Charges	\$12,500.00	\$12,500.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A

FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
Non-zoning permits	\$500.00	\$500.00	N/A	N/A	N/A
Sub-total	\$79,710.14	\$79,145.14	N/A	\$0.00	N/A
Total for all systems	\$2,513,022.04	\$1,629,990.74	N/A	\$62,666.34	N/A

### Components

Information not provided.

## Cost Information

#### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$2,513,022.04	\$1,629,990.74	\$62,666.34

Reimburseme	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

Section Question Response

## Submission of Estimated Expenses Statements

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.

- 1. The Authorized
  Person signing
  below certifies that he
  /she is authorized to
  submit this TV
  Broadcaster
  Relocation Fund
  Reimbursement
  Form on behalf of
  the above-named
  entity.
- 2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.
- 3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.

- 4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
- 7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the abovenamed applicant for the Authorization(s) specified above. Beverly Poston President

02/23/2018

Section Question Response

# Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).

- 1. The Authorized
  Person signing
  below certifies and
  represents that he
  /she is authorized to
  submit this TV
  Broadcaster
  Relocation Fund
  Reimbursement
  Form on behalf of
  the above-named
  entity.
- The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.
- The above-named entity acknowledges that all certifications and attached documentation are considered material representations.

- 4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
- 5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

- 8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the abovenamed applicant for the Authorization(s) specified above. Beverly Poston

President

02/23/2018

#### **Attachments**