

(REFERENCE COPY - Not for submission)

### FCC Form 399: Reimbursement Request

Facility 74211 Service: DTV Call WMYD Channel: 31 (UHF)

ID: Sign:

ID: File

0000027261

Number:

FRN: **0002710192** 

Date **06/18** 

Submitted: /2018

## Applicant Information

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

Applicant	Address	Phone	Email	Applicant Type
SCRIPPS BROADCASTING HOLDINGS LLC Doing Business As: SCRIPPS MEDIA, INC.	David Giles 312 WALNUT STREET 28TH FLOOR CINCINNATI, OH 45202 United States	+1 (512) 977- 3000	DAVE. GILES@SCRIPPS. COM	Corporation

### 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
Ray Thurber Vice President / Engineering SCRIPPS BROADCASTING HOLDINGS LLC	Ray Thurber 312 Walnut St. Cincinnati, OH 45202 United States	+1 (248) 827- 9202	ray. thurber@scripps. 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	WMYD must replace its main antenna and transmitter in order to move it its new channel. It will need to install interim facilities in order to be able to replace the main facility. See attached narrative for a more detailed explanation

#### **Transmitters**

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

### Auxiliary Transmitter

#### **Add Transmitter Information**

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	Backup
	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	Sigma CD 3
	Year	1998
	Туре	Inductive Output Tube
	IOT Power Type	Single
	Power Capacity	23.0 kW

### Auxiliary Transmitter

#### **New Transmitter Costs**

Section	Question	Response
New Transmitter	Use	Auxiliary (Backup)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	ULXTE-50
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	31.7 kW
	Justification for New Transmitter	Current transmitter is no longer supported by the manufacturer except for maintenance. Available parts are in very limited supply and in some cases are no longer available. Manufacturer says it cannot be re- tuned.

### Auxiliary Transmitter

#### **Other Transmitter Costs**

nnce (3 phases 800A 208V)
ndustrial 800 amp) No

	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Туре	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

Auxiliary
Transmitter Information not provided.

Other Transmitter Cost Not Listed

### 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	Sigma CD 3
	Year	2004
	Туре	Inductive Output Tube
	IOT Power Type	Single
	Power Capacity	23.0 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	ULXTE-50
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	31.7 kW
	Justification for New Transmitter	Current transmitter is no longer supported by the manufacturer except for maintenance. Available parts are in very limited supply and in some cases are no longer available. Manufacturer says it cannot be re- tuned.

### Primary Transmitter

### **Other Transmitter Costs**

Question	Response
Service Entrance (3 phases 800A 208V)	No
Switchgear (industrial 800 amp)	No
	Service Entrance (3 phases 800A 208V)

	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	Yes
	Description	Necessary switchgear, transformer conduit, wiring and fuse disconnects as quoted by electrical contractor for main and auxiliary transmitter.
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

**Other Transmitter Cost Not Listed** 

Primary
Transmitter Information not provided.

#### **Antennas**

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

#### **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?	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	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)	500.0 kW

Manufacturer	
Model	TFU- 23ETT-R CT3 DC
Year	2004

#### **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?	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)	622.0 kW
	Manufacturer	

Model	TFU- 23ETT-R CT3
Year	2019
Justification for New Antenna	Existing main antenna is a coaxial slot antenna that is channel specific and cannot be reused on the new channel.

#### **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
Michigan Sales Tax	Michigan Sales Tax on Antenna Expenses.

Transmission	effien	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	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?	Yes
	Is tower compliant with Rev G?	Yes
Existing Tower	Do you have a tower registration number?	Yes
Structure Registration	ASR Number	1003429
Coordinates (NAD83 (	Latitude (NAD83)	42° 26' 52.5" N-
North American Datum of 1983))	Longitude (NAD83)	083° 10' 23.1" W-
	Overall Structure Height	1086.93 feet

Support Structure Height	1012.13 feet
Ground Elevation Above Mean Sea Level (AMSL)	662.07 feet
Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	American Tower, LLC
Date Constructed	06/11/1999

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
16817	WTVS	DTV
72123	WWJ-TV	DTV

#### Primary Tower

#### **Tower Modification Costs**

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for tower with candelabra
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	Candelabra

Helicopter Services	Are helicopter services required?	No
Required		

#### Primary Tower

#### **Other Tower Expenses Not Listed**

Name	Description
Michigan Sales Tax	Michigan Sales Tax on Tower Expenses

#### Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	240
	Explanation	Project manager needed to manage all work at transmitter site required to transition to new channel (both the main and interim facilities). With the size of the current engineering staff, WMYD cannot spare personnel to ensure these tasks are completed.
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
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	Yes
Prepare or Review FCC Form 399 for Reimbursement	Yes
Address transition timing and coordination issues w/ other stations and wireless providers	Yes

Attorney and Other Outside Consulting

Services

RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

#### Outside Professional

### Other Professional Services Expenses Not Listed

Services Costs	Description
Michigan Sales Tax	Michigan Sales Tax on Professional Services
Site Survey	GatesAir performed a site survey to access changes to facility as necessary to transition to new channel including, power and HVAC requirements, available transmitter room space and existing antenna and transmission line RF characteristics at new channel.

# 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	Yes
	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
Employee Time	Time needed by Scripps corporate and WMYD employees to work on the transition to a new channel.
Interim Facility	American Tower (site owner) will provide the interim facility for WMYD. They will be taking care of purchase of antenna and transmission line and all necessary permits, structural analysis, rigging, and installation for a flat fee.
Michigan Sales Tax	Michigan Sales Tax on Other Expenses

# **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 ULXTE-50	\$969,986.87	\$969,986.87		\$0.00	
Other Electrical Service: Necessary switchgear, transformer, conduit, wiring and fuse disconnects as quoted by electrical contractor for main and auxiliary transmitter.	\$103,230.00	\$103,230.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 31.7 kW	\$866,756.87	\$866,756.87	N/A	N/A	N/A
Auxiliary Transmitter ULXTE-50	\$715,349.00	\$715,349.00		\$0.00	
UHF - Liquid Cooled Solid State Transmitter 31.7 kW	\$715,349.00	\$715,349.00	N/A	N/A	N/A
Sub-total	\$1,685,335.87	\$1,685,335.87	N/A	\$0.00	N/A

Total for	\$3,268,468.87	\$3,220,433.87	N/A	\$211,954.25	N/A
all systems					

#### 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-23ETT- R CT3	\$268,214.00	\$255,884.00		\$114,052.50	
UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized	\$247,000.00	\$235,000.00	N/A	\$114,052.50	N/A
Michigan Sales Tax	\$14,484.00	\$14,484.00	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	\$268,214.00	\$255,884.00	N/A	\$114,052.50	N/A
Total for all systems	\$3,268,468.87	\$3,220,433.87	N/A	\$211,954.25	N/A

#### Components

Actual Information Description	File Name	
UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized	Component Description:	Dielectric High Power Antenna Milestone 1
	Amount:	\$114,052.50

Michigan Sales Tax	Information not provided.
Sweep test of existing antenna	Information not provided.

#### **Transmission Line**

### Cost Information

**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	\$633,590.00	\$603,590.00		\$97,901.75	
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$400,000.00	N/A	\$97,901.75	N/A
Michigan Sales Tax	\$34,590.00	\$34,590.00	N/A	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Structural engineering tower load study for a documented tower with candelabra	\$20,000.00	\$19,000.00	N/A	N/A	N/A
Sub-total	\$633,590.00	\$603,590.00	N/A	\$97,901.75	N/A
Total for all systems	\$3,268,468.87	\$3,220,433.87	N/A	\$211,954.25	N/A

#### Components

Actual Information Description	File Name	
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	Component Description: Amount:	American Tower 1st installment \$97,901.75
Michigan Sales Tax	Information not provided.	
Minor tower reinforcement /modifications	Information not provided.	
Structural engineering tower load study for a documented tower with candelabra	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	\$117,960.00	\$112,820.00		\$0.00	
Site Survey	\$17,684.00	\$17,684.00	N/A	N/A	N/A
Michigan Sales Tax	\$6,386.00	\$6,386.00	N/A	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	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 - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
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
Project management of the transition	\$37,920.00	\$36,000.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A

Total for all	\$3,268,468.87	\$3,220,433.87	N/A	\$211,954.25	N/A
systems					

#### Components

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	\$563,369.00	\$562,804.00		\$0.00	
Michigan Sales Tax	\$21,356.00	\$21,356.00	N/A	N/A	N/A
Interim Facility	\$315,933.00	\$315,933.00	N/A	N/A	N/A
Employee Time	\$125,000.00	\$125,000.00	N/A	N/A	N/A
MVPD Notification of Channel Change	\$2,500.00	\$2,500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$6,500.00	\$6,500.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Non-zoning permits	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Local Zoning	\$25,000.00	\$25,000.00	N/A	N/A	N/A

Total for all systems	\$3,268,468.87	\$3,220,433.87	N/A	\$211,954.25	N/A
Sub-total	\$563,369.00	\$562,804.00	N/A	\$0.00	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

### Components

Information not provided.

# Cost Information

#### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$3,268,468.87	\$3,220,433.87	\$211,954.25

Reimbursem	envestiatus	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. Sravan Reddy Senior Director, General Accounting

06/18/2018

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. Sravan
Reddy
Senior
Director,
General
Accounting

06/18/2018

#### **Attachments**