



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **74211** | Service: **DTV** | Call **WMYD** | Channel: **31 (UHF)** |
ID: | Sign:
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 Information

Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Information

Preparer Contact Name and Information

Applicant	Address	Phone	Email
Ray Thurber <i>Vice President / Engineering</i> 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

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 and Type	Manufacturer	
	Model	Sigma CD 3
	Year	1998
	Type	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**

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

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

Auxiliary Transmitter **Other Transmitter Cost Not Listed**
Information not provided.

**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	Sigma CD 3
	Year	2004
	Type	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

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

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

Primary	Other Transmitter Cost Not Listed
Transmitter	Information not provided.

Antennas

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

**Primary
Antenna**

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	Yes
	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	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

Primary
Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	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
	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)	622.0 kW
	Manufacturer	

Model	TFU-23ETT-RCT3
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.

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

Name		Description
Michigan Sales Tax		Michigan Sales Tax on Antenna Expenses.

Transmission Line

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	No

Tower Equipment And Rigging Costs

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

Primary Tower**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	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 Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1003429
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	42° 26' 52.5" N-
	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 Required	Are helicopter services required?	No
---	-----------------------------------	----

**Primary
Tower**

Other Tower Expenses Not Listed

Name	Description
Michigan Sales Tax	Michigan Sales Tax on Tower Expenses

**Outside
Professional Services Costs**

Section	Question	Response
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
Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	Yes
	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	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Professional Services

Other Professional Services Expenses Not Listed

Services Costs

Name

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		\$546,319.05	
UHF - Liquid Cooled Solid State Transmitter 31.7 kW	<i>\$866,756.87</i>	\$866,756.87	N/A	\$546,319.05	N/A
Other Electrical Service: Necessary switchgear, transformer, conduit, wiring and fuse disconnects as quoted by electrical contractor for main and auxiliary transmitter.	<i>\$103,230.00</i>	\$103,230.00	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	<i>\$715,349.00</i>	\$715,349.00	N/A	N/A	N/A
Sub-total	\$1,685,335.87	\$1,685,335.87	N/A	\$546,319.05	N/A

Total for all systems	\$3,268,468.87	\$3,220,433.87	N/A	\$758,273.30	N/A
------------------------------	----------------	----------------	-----	--------------	-----

Components

Actual Information	
Description	File Name
UHF - Liquid Cooled Solid State Transmitter 31.7 kW	<div> Component Description: Gates Air WMYD 1st Installment Transmitter </div> <div> Amount: \$546,319.05 </div>
Other Electrical Service: Necessary switchgear, transformer, conduit, wiring and fuse disconnects as quoted by electrical contractor for main and auxiliary transmitter.	Information not provided.
UHF - Liquid Cooled Solid State Transmitter 31.7 kW	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	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Michigan Sales Tax	\$14,484.00	\$14,484.00	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	\$114,052.50	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	\$758,273.30	N/A

Components

Actual Information	
Description	File Name
Sweep test of existing antenna	Information not provided.
Michigan Sales Tax	Information not provided.

UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized	<table><tr><td data-bbox="707 96 1141 392">Component Description:</td><td data-bbox="1141 96 1431 392">Dielectric High Power Antenna</td></tr><tr><td data-bbox="707 392 1141 392">Amount:</td><td data-bbox="1141 392 1431 392">Milestone 1 \$114,052.50</td></tr></table>	Component Description:	Dielectric High Power Antenna	Amount:	Milestone 1 \$114,052.50
Component Description:	Dielectric High Power Antenna				
Amount:	Milestone 1 \$114,052.50				

Cost Information **Transmission Line**
Information not provided.

Cost Information **Tower Equipment and Rigging Costs**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower GTOWER	\$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	<i>\$34,590.00</i>	\$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	\$758,273.30	N/A

Components

Actual Information	
Description	File Name
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	Component Description: American Tower 1st installment Amount: \$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	<i>\$17,684.00</i>	\$17,684.00	N/A	N/A	N/A
Michigan Sales Tax	<i>\$6,386.00</i>	\$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
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
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Sub-total	\$117,960.00	\$112,820.00	N/A	\$0.00	N/A

Total for all systems	\$3,268,468.87	\$3,220,433.87	N/A	\$758,273.30	N/A
------------------------------	----------------	----------------	-----	--------------	-----

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	
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
Local Zoning	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$6,500.00</i>	\$6,500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A

MVPD Notification of Channel Change	\$2,500.00	\$2,500.00	N/A	N/A	N/A
Employee Time	\$125,000.00	\$125,000.00	N/A	N/A	N/A
Interim Facility	\$315,933.00	\$315,933.00	N/A	N/A	N/A
Michigan Sales Tax	\$21,356.00	\$21,356.00	N/A	N/A	N/A
Sub-total	\$563,369.00	\$562,804.00	N/A	\$0.00	N/A
Total for all systems	\$3,268,468.87	\$3,220,433.87	N/A	\$758,273.30	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	\$758,273.30

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>Sravan Reddy <i>Senior Director, General Accounting</i></p> <p>06/18/2018</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>Sravan Reddy <i>Senior Director, General Accounting</i></p> <p>06/18/2018</p>

Attachments