

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility 37099 Service: DTV Call KWHB Channel: 16 (UHF)

Sign:

ID:

File **0000025207**

Number:

FRN: **0005935499** Date **08/06**

Submitted: /2018

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
LeSEA Broadcasting of Tulsa, Inc.	61300 Ironwood Road South Bend, IN 46614 United States	+1 (574) 291-8200	whylton@lesea. com	Not-for- Profit

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
Joseph C. Chautin III Hardy, Carey, Chautin & Balkin	1080 West Causeway Approach Mandeville, LA 70471 United States	+1 (985) 629- 0777	jchautin@hardycarey. 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 transmitter, antenna, and transmission line.

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	Ultimatte
	Year	2001
	Туре	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power Capacity	4 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	THU9EVO-
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	6.5 kW
	Justification for New Transmitter	Current transmitter can not be retuned

Primary Transmitter

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	Yes
	Size	1.5 inches
	Length	35.0 feet
	Other Electrical Service	No
	Description	N/A

HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Туре	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
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

Transmitter Information not provided.

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)	50.0 kW

Manufacturer	
Model	TFU- 24DSC-R- C170 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?	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	Class	Full Power
Manufacturer and Types	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	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)	18.0 kW
	Manufacturer	

Model	TFU16-GTH /VP-R O4
Year	2018
Justification for New Antenna	UPGRADED ANTENNA

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?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	3 1/8 inches inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes

Other Antenna Cost Not Listed

Name	Description
MOUNTING PLATE	Mounting plate for base of antenna

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

Interim Transmission

New Transmission Line

n Line Section	Question	Response
New Transmission Line	Use	Interim
Costs	Description of Use	N/A
	Change Type	Purchase New
	Туре	Flexible Foam
	Diameter	1 5/8 inches
	Segment Length	N/A
	Other Segment Length	
	Number of parallel runs	1
	Length	150 feet per run
	Justification for New Transmission Line	Interim Operation

Interim

Other Transmission Line Expenses Not Listed

Transmission	Name	Description
	Connectors Etc.	1-5/8 connectors, bullets, standoffs etc

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	Move Equipment
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	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 Structure	Do you have a tower registration number?	No
Registration	ASR Number	
Coordinates (NAD83 (North American Datum of	Latitude (NAD83)	36° 02' 35.3" N-
1983))	Longitude (NAD83)	095° 57' 12.0" W-
	Overall Structure Height	1838.89 fee
	Support Structure Height	1838.89 fee
	Ground Elevation Above Mean Sea Level (AMSL)	709.97 feet

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	TULSA TOWER JOINT VENTURE
Date Constructed	09/01/1984

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	650
	Explanation	LeSEA doesn't have sufficient staff to deal with the issues related to invoice filing and dealing with the FCC rejections.
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	No
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
Comprehensive coverage verification via field study	Yes
RF exposure measurements	No
Additional Field Engineering Service	Yes
Number of Days	1
Justification	Project Coordination

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

RF Field Engineering

Services

Antenna Replacement	Expenses to remove and replace antennas
Consultant	Planning, consulting, cooridination

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?	No
	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?	No

Other Expenses

Other Expenses Not Listed

Name	Description
Travel Expenses	Travel and lodging expenses for being on site

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 THU9EVO-4	\$304,050.00	\$295,591.86		\$236,393.65	
UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW	\$273,500.00	\$266,291.86	Upgraded 6.5KW transmitter.	\$236,393.65	N/A
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	N/A	N/A
1.5" Rigid Conduit and Wiring	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Sub-total	\$304,050.00	\$295,591.86	N/A	\$236,393.65	N/A
Total for all systems	\$1,093,214.00	\$921,420.16	N/A	\$539,398.97	N/A

Actual Information		
Description	File Name	

State Transmitter 4.9 . 6.5 kW	Component Description:	30% of quoted 4.9 kW transmitter costs
	Amount:	\$68,493.50
	Component Description:	Electrical Work at
	Amount:	CityPlex Towers \$8,082.00
	Component Description:	70% of quoted 4.9 kW transmitter cost
	Amount:	\$159,818.15
Transformer 3 phase/480v - 150 KVA	Information not provided.	

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 TFU16-GTH /VP-R O4	\$325,830.00	\$235,950.30		\$201,146.55	
MOUNTING PLATE	\$22,000.00	\$22,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$6,400.00	N/A
Elbow complex, single channel, at antenna input, per 3 1 /8. feedline (if needed)	\$7,600.00	\$7,400.00	N/A	N/A	N/A
UHF - High Power Top Mount (200- 1000 kW), One station antenna, elliptically or circularly polarized	\$289,500.00	\$200,150.30	N/A	\$194,746.55	N/A
Sub-total	\$325,830.00	\$235,950.30	N/A	\$201,146.55	N/A
Total for all systems	\$1,093,214.00	\$921,420.16	N/A	\$539,398.97	N/A

Actual Information	
Description	File Name

MOUNTING PLATE	Information not provided.	
Sweep test of existing antenna	Component Description: Amount:	Primary antenna sweep test \$2,880.00
	Component Description: Amount:	Primary antenna sweep test \$3,520.00
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	Information not provided.	
UHF - High Power Top Mount (200-1000 kW), One station antenna, elliptically or circularly polarized	Component Description: Amount:	Fabricate antenna wall mounting bracket pedestal \$21,873.20
	Component Description:	remaining approved amount of invoice- we will pay for the upgrade
	Amount:	upgrade \$95,274.74
	Component Description:	down payment on invoice
	Amount:	\$77,598.61

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
Interim Transmission Line	\$4,404.00	\$4,254.00		\$2,534.97	
Flexible Foam Transmission Line - dielectric, 1 5 /8"	\$3,600.00	\$3,450.00	N/A	\$2,534.97	N/A
Connectors Etc.	\$804.00	\$804.00	N/A	N/A	N/A
Sub-total	\$4,404.00	\$4,254.00	N/A	\$2,534.97	N/A
Total for all systems	\$1,093,214.00	\$921,420.16	N/A	\$539,398.97	N/A

Actual Information Description	File Name	
Flexible Foam Transmission Line - dielectric, 1 5/8"	Component Description: Amount:	Primary transmission line \$1,394.22
	Component Description: Amount:	Primary transmission line \$1,140.75
Connectors Etc.	Information not provided.	

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	\$210,500.00	\$155,600.00		\$92,900.00	
Tall Tower (greater than 500')	\$210,500.00	\$155,600.00	N/A	\$92,900.00	N/A
Sub-total	\$210,500.00	\$155,600.00	N/A	\$92,900.00	N/A
Total for all systems	\$1,093,214.00	\$921,420.16	N/A	\$539,398.97	N/A

Actual Information Description	File Name	
Tall Tower (greater than 500')		
	Component Description:	Tower Rigging Services- Helicopter Lift
	Amount:	\$69,075.00
	Component Description:	Tower Rigging Services-
	Amount:	Helicopter Lift \$23,825.00
	Component Description:	deposit on needed tower services
	Amount:	\$23,825.00

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	\$227,880.00	\$217,250.00		\$6,423.80	
Consultant	\$8,000.00	\$8,000.00	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
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
Antenna Replacement	\$0.00	\$0.00	0	N/A	N/A
Project management of the transition	\$102,700.00	\$97,500.00	Widelity quote plus additional hours per DTVPros invoices	\$5,223.80	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
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	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
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Additional Field Engineering Service, 1 Days	\$8,000.00	\$8,000.00	Preplannin	\$1,200.00	N/A
Sub-total	\$227,880.00	\$217,250.00	N/A	\$6,423.80	N/A
Total for all systems	\$1,093,214.00	\$921,420.16	N/A	\$539,398.97	N/A

Actual Information Description	File Name	
Consultant	Information not provided.	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Antenna Replacement	Information not provided.	
Project management of the transition	Component Description: Amount:	Project Management \$1,983.80
	Component Description: Amount:	Project Management \$3,240.00
Prepare and or review reimbursement form	Information not provided.	
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.	
Perform engineering study for new channel assignment and antenna development	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Comprehensive coverage verification via field study, if needed	Information not provided.	

Additional Field Engineering Service, 1 Days

Component Description: 1 day/8 hours at

\$150 an hour

Amount: \$1,200.00

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	\$20,550.00	\$12,774.00		\$0.00	
DTV Medical Facility Notification	\$11,550.00	\$3,774.00	N/A	N/A	N/A
Travel Expenses	\$3,500.00	\$3,500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$2,500.00	\$2,500.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$3,000.00	\$3,000.00	N/A	N/A	N/A
Sub-total	\$20,550.00	\$12,774.00	N/A	\$0.00	N/A
Total for all systems	\$1,093,214.00	\$921,420.16	N/A	\$539,398.97	N/A

Components

Information not provided.

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,093,214.00	\$921,420.16	\$539,398.97

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. Tony Agostino CFO

08/06/2018

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. Tony Agostino CFO

08/06/2018

Attachments