



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility	13922	Service:	LPA	Call	W30EI-D	Channel:	30 (UHF)
ID:		Sign:					
File	0000085105						
Number:							
FRN:	0003739364	Eligibility	Eligible	Date	09/15		
		Status:		Submitted:	/2020		

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
CORNERSTONE TELEVISION, INC. Doing Business As: CORNERSTONE TELEVISION, INC.	1 SIGNAL HILL DRIVE WALL, PA 15148 United States	+1 (412) 349-4330	sjohnson@ctvn.org	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
JOSEPH C CHAUTIN <i>Hardy, Carey, Chautin & Balkin LLC</i>	Joseph C Chautin 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		Prepare and execute equipment orders Prepare tower for new Antenna and transmission line Install Antenna and Transmission line Install Transmitter and related Begin testing on appropriate date

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)
	Ownership	Owned
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter Manufacturer and Type	Manufacturer	
	Model	LU1000W
	Year	2006
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	1 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	UAXTE-3
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1 kW
	Justification for New Transmitter	Transmitter no longer supported and manufacturer will not retune

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Other Transmitter Costs	Does the transmitter installation require a Transmitter Building Site Survey /Installation?	Yes
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Rigid Conduit and Wiring	No
	Other Electrical Service	Yes

	Description	Transfer of electric wiring from the current transmitter to the replacement transmitter.
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Type	Cooling Only
	Size	5 tons
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No

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

Antennas

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

**Primary
Antenna**

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Ownership	Owned
	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	Mounting	Side Mount
	Antenna position in stack	Top
	Polarization	Horizontal
	Type	Slotted Coaxial
	ERP: (Effective Radiated Power)	8.9 kW
	Manufacturer	
	Model	SWLP80I /29
	Year	2006

**Primary
Antenna**

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Change Type	Purchase New
	Ownership	Owned
	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	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	PSILP8OI- 30
	Year	2019
	Justification for New Antenna	Current antenna is frequency specific for channel 29 and will not work for channel 30.

**Primary
Antenna**

Other Antenna Costs

Section	Question	Response
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Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary
Antenna**

Other Antenna Cost Not Listed

Information not provided.

Transmission Line

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	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)
	Ownership	Leased
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	No
	Others Types of Users	Yes
	Is tower documented for structural analysis?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1036482
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	41° 14' 17.0" N-
	Longitude (NAD83)	080° 25' 49.0" W-
	Overall Structure Height	311.68 feet

Support Structure Height	298.55 feet
Ground Elevation Above Mean Sea Level (AMSL)	1266.39 feet
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	RADIO AIRWAYS INC
Date Constructed	07/01/1987

Other Types of Users

Users
Cellular
Paging

Primary Tower

Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	No study needed
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 Services Costs**

Section	Question	Response
Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	194
	Explanation	W30EI-D does not have sufficient resource capacity and expertise in house for all activities necessary to facilitate on-time completion of the station's build. W30EI-D will hire an outside firm to ensure a timely and well managed transition.
Outside RF consulting Engineering Services	Perform engineering study for displacement application	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

Attorney and Other Outside Consulting Services	Prepare request for Special Temporary Authority	No
	Prepare Form 601	No
	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
	Negotiation of Lease and other Matter for Shared Locations	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Form 399 assistance or other program management costs	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	Yes
	Additional Field Engineering Service	No

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Attorney Fees - Address transition timing and coordination issues with other stations and wireless	Attorney Services required to address transition timing and coordination issues with other stations and wireless providers

**Other
Expenses**

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Permit and Filing Costs	FCC Construction Permit Major Change	No
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	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)?	No
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	No
Point to Point Microwave (STL/ICR)	Frequency Coordination for Unidirection System	No
	Frequency Coordination for Bi-Direction System	No
	New Point to Point Microwave System	No

**Other
Expenses**

Other Expenses Not Listed

Information not provided.

Cost Information

Transmitters

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmitter UAXTE-3	\$119,250.00	\$112,386.90		\$67,427.36	
Transmitter Building Site Survey /Installation	\$10,000.00	\$10,000.00	N/A	N/A	N/A
5 Ton system	\$20,250.00	\$20,250.00	N/A	N/A	N/A
Other Electrical Service: Transfer of electric wiring from the current transmitter to the replacement transmitter.	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$84,000.00	\$77,136.90	Please see W30EI-D GatesAir quotes Q-84419 and Q-84114	\$67,427.36	N/A
Sub-total	\$119,250.00	\$112,386.90	N/A	\$67,427.36	N/A
Total for all systems	\$261,032.00	\$212,261.40	N/A	\$91,247.67	N/A

Components

Actual Information Description	File Name
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Transmitter Building Site Survey/Installation	Information not provided.	
5 Ton system	Information not provided.	
Other Electrical Service: Transfer of electric wiring from the current transmitter to the replacement transmitter.	Information not provided.	
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	Component Description: Amount:	UAXTE-2R37 Transmitter \$64,398.11 UAXTE-2R37 Transmitter per Quote Q-84114 \$3,029.25

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 PSILP8OI-30	\$11,460.00	\$11,460.00		\$5,680.36	
Sweep test of transmission line and antenna	\$5,730.00	\$5,730.00	N/A	N/A	N/A
UHF-Low Power, Side Mount, Slotted Coaxial, 15.0 kW input, Horizontal	<i>\$5,730.00</i>	\$5,730.00	N/A	\$5,680.36	N/A
Sub-total	\$11,460.00	\$11,460.00	N/A	\$5,680.36	N/A
Total for all systems	\$261,032.00	\$212,261.40	N/A	\$91,247.67	N/A

Components

Actual Information	
Description	File Name
Sweep test of transmission line and antenna	Information not provided.
UHF-Low Power, Side Mount, Slotted Coaxial, 15.0kW input, Horizontal	<div>Component Description: UHF Slot Antenna</div> <div>Amount: \$5,680.36</div>

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 TOWER	\$56,190.00	\$4,000.00		\$4,000.00	
Tower Rigging Short Tower (less than 500')	\$56,190.00	\$4,000.00	Please see MultiComm proposal dated 2/10 /20	\$4,000.00	N/A
Sub-total	\$56,190.00	\$4,000.00	N/A	\$4,000.00	N/A
Total for all systems	\$261,032.00	\$212,261.40	N/A	\$91,247.67	N/A

Components

Actual Information	
Description	File Name
Tower Rigging Short Tower (less than 500')	<div>Component Description:As per quote dated February 10,2020</div> <div>Amount:\$4,000.00</div>

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	\$70,187.00	\$80,469.50		\$14,139.95	
Project management of the transition	\$20,467.00	\$32,010.00	See Widely Strategic Support Quote	\$9,302.95	N/A
Attorney Fees - Address transition timing and coordination issues with other stations and wireless	<i>\$90.00</i>	\$90.00	Please see W30EI Transition Timing and Coordination Budget Revision Justification letter	\$90.00	N/A
RF Exposure Measurements	\$12,100.00	\$12,100.00	N/A	N/A	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$3,262.50	\$2,002.00	see Estimated Cost Justification W30EI-D-550-Attorney - Negotiation of Lease and Other Matters v1	\$2,002.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$1,577.50	\$1,577.50	N/A	N/A	N/A

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$3,025.00	\$3,025.00	N/A	\$870.00	N/A
Prepare/ Review 399 reimbursement form	\$1,710.00	\$1,710.00	N/A	\$375.00	N/A
Form 399 assistance or other Program Management costs	\$23,000.00	\$23,000.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$2,102.50	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,052.50	\$1,052.50	N/A	N/A	N/A
Perform engineering study for displacement application	\$1,800.00	\$1,800.00	N/A	\$1,500.00	N/A
Sub-total	\$70,187.00	\$80,469.50	N/A	\$14,139.95	N/A
Total for all systems	\$261,032.00	\$212,261.40	N/A	\$91,247.67	N/A

Components

Actual Information		
Description	File Name	
Project management of the transition	Component Description:	Project Management
	Amount:	\$764.30
	Component Description:	Project Management
	Amount:	\$28.75
	Component Description:	Project Management
	Amount:	\$1,850.85
	Component Description:	Project Management
	Amount:	\$1,266.70
	Component Description:	Project Management
	Amount:	\$1,084.70
	Component Description:	Project Management
	Amount:	\$655.65
	Component Description:	Project Management
	Amount:	\$3,652.00
Attorney Fees - Address transition timing and coordination issues with other stations and wireless	Component Description:	W30EI-D-550-Attorney - Address Transition timing and coordination
	Amount:	\$90.00

RF Exposure Measurements	Information not provided.	
Attorney Fees - Negotiation of lease and other matters for shared locations	Component Description: Amount:	Prof. Services Rendered \$90.00 Review draft NPRM \$90.00 Prof. Services Rendered \$1,020.00 W30EI-D-550- Attorney - Negotiation of Lease and Other Matters \$88.00 Professional Services \$519.00 Prof. Services Rendered \$195.00
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: Professional
Services
Amount: \$330.00

Component Description: Review granted
displacement
permit
Amount: \$90.00

Component Description: Review draft
Amount: \$180.00

Component Description: Review status
Amount: \$180.00

Component Description: Load and complete
legal and other
sections
Amount: \$90.00

Prepare/ Review 399 reimbursement form	Component Description: Professional Services Amount: \$150.00
	Component Description: W30EI-D-510-Prepare/Review FCC 399 Reimbursement Form Amount: \$45.00
	Component Description: Professional Services Amount: \$90.00
	Component Description: W30EI-D-510-Prepare/Review FCC 399 Reimbursement Form Amount: \$90.00
Form 399 assistance or other Program Management costs	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.

Perform engineering study
for displacement application

Component Description:

W45BT Brookville:
Channel Search
and Application for
LPTV Displacement

Amount:

\$1,000.00

Component Description:

Professional
Services

Amount:

\$500.00

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	\$3,945.00	\$3,945.00		\$0.00	
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,110.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$335.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$2,500.00</i>	\$2,500.00	N/A	N/A	N/A
Sub-total	\$3,945.00	\$3,945.00	N/A	\$0.00	N/A
Total for all systems	\$261,032.00	\$212,261.40	N/A	\$91,247.67	N/A

Components

Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$261,032.00	\$212,261.40
			\$91,247.67

Reimbursement Status	Question	Response
	The facility has ceased operating on its pre-auction channel.	Yes
	Construction of final facilities or all necessary modifications are complete.	Yes
	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.

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 above-named applicant for the Authorization(s) specified above.

Steve Johnson
President & CEO

09/15/2020

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	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).	
		<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>Steve Johnson <i>President & CEO</i></p> <p>09/15/2020</p>

Certification	Section	Question	Response
	Submission of Final Allocation or Accounting Information 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 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 acknowledges that all certifications and attached documentation are considered material representations. 2. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. 	

3. The above-named entity certifies that all costs identified as "actual costs" herein accurately represent the costs actually paid by the above-named entity, including any discounts, refunds, or rebates.
4. 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.
5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
6. 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 above-named applicant for the Authorization(s) specified above.

Steve Johnson
President & CEO

09/15/2020

Attachments