



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **62180** | Service: **LPD** | Call **WAUG-LD** | Channel:  
ID: | Sign:  
**4 (Low VHF)** | File **0000090860**  
Number:  
FRN: **0011324423** | Eligibility **Eligible** | Date **11/24**  
Status: | Submitted: **/2020**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>Saint Augustine's University</b> Doing Business As: Saint Augustine's University	1315 Oakwood Avenue Raleigh, NC 27610 United States	+1 (919) 516-4430	CYoung@st-aug.edu	Private Not-for-Profit Educational Institution

## 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
<b>Elizabeth E Spainhour</b> <i>Outside Legal Counsel</i> <i>Brooks, Pierce et al.</i>	150 Fayetteville Street Suite 1700 Raleigh, NC 27601 United States	+1 (919) 839-0300	espainhour@brookspierce.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	WAUG-LD is currently dark/silent as a result of the need to vacate its ch. 8 operation due to a full-service repack facility. WAUG-LD must remain off-the-air until the new ch. 4 facility is ready for operation. See WAUG-LD Displacement Form 399 Exhibit.

**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	PW2VTX3KW
	Year	2014
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	3.0 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?	No
	Manufacturer	
	Model	VAXTE-3L
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	3.0 kW
	Justification for New Transmitter	Current Transmitter operates on Channel 8 a hi-VHF frequency. Displacement channel is Channel 4, a lo-vhf channel. The current transmitter cannot be re-tuned to operate on the new displacement channel.

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
Other Transmitter Costs	Does the transmitter installation require a Transmitter Building Site Survey /Installation?	Yes

<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Rigid Conduit and Wiring	No
	Other Electrical Service	No
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	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
<b>Existing Antenna Description</b>	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?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
<b>Existing Antenna Manufacturer and Type</b>	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	Type	Slotted Coaxial
	ERP: (Effective Radiated Power)	3.0 kW
	Manufacturer	
	Model	EMT2V1- CSO-8
	Year	2014

## Primary Antenna

### New Antenna Costs

Section	Question	Response
<b>New Antenna Description</b>	Use	Primary (Main)
	Change Type	Purchase New
	Ownership	Owned
	Is antenna shared?	No
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	No
<b>New Antenna Manufacturer and Types</b>	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	Type	Cross Dipole
	ERP: (Effective Radiated Power) .....	3.0 kW
	Manufacturer	
	Model	ATC-BDH2O-4
	Year	2019
	Justification for New Antenna	The current antenna is a hi-VHF channel 8 slotted coaxial antenna that cannot be re-tuned for operation on the lo-VHF channel 4 displacement channel.



**Primary  
Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	1 5/8 inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	Yes
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Name	Description
Transmission Line Iso-Coupler	Transmission Line Iso-Coupler

**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	Move Equipment
	Tower Use	Primary (Main)
	Ownership	Owned
	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)	Yes
	Others Types of Users	No
	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	1022011
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	35° 47' 30.0" N-
	Longitude (NAD83)	078° 37' 09.0" W-
	Overall Structure Height	288.05 feet

Support Structure Height	284.45 feet
Ground Elevation Above Mean Sea Level (AMSL)	319.88 feet
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	SAINT AUGUSTINES COLLEGE DBA = WAUG
Date Constructed	04/01/1987

**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
58586	WAUG	AM
201622	W278CT	FX

**Primary  
Tower**

**Tower Rigging Costs**

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

**Primary  
Tower**

**Other Tower Expenses Not Listed**

Information not provided.

**Outside  
Professional**

Section	Question	Response
<b>Services Costs Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	50
	Explanation	The licensee does not have available staff resources that can coordinate and manage the project during the pre and post construction phases.
<b>Outside RF consulting Engineering Services</b>	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
	Prepare request for Special Temporary Authority	Yes
	Quantity	2
	Prepare Form 601	No
<b>Attorney and Other Outside Consulting Services</b>	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	2
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Form 399 assistance or other program management costs	No
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	Yes
	Number of Days	1
	Justification	The proposal is co-located with an AM facility that will require field measurements to determine that no changes in the AM station antenna operation have occurred.

**Outside Professional Services Costs**

**Other Professional Services Expenses Not Listed**

Name	Description
RF Consultant Form 399	Review of RF related items for inclusion in form 399 estimates.

<b>RF Consultant Prepare Engineering STA</b>	Prepare Engineering STA for interim antenna operation and supporting application material if needed during transition period.
<b>Additional Displacement Legal Services Not Otherwise Specified in Form 399</b>	Additional Displacement Legal Services Not Otherwise Specified in Form 399
<b>RF Consultant Project Review</b>	RF Consulting Engineering review of equipment selection, assistance in technical matters concerning FCC rule compliance and product suitability. Estimated 10 hours at \$250/hr.
<b>Tower Structural Engineering Study</b>	Tower mapping and structural study.

**Other  
Expenses**

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	Yes
	Is Remediation needed?	No
<b>Permit and Filing Costs</b>	FCC Construction Permit Major Change	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	No
	FCC Special Temporary Authority Application	No
<b>Other Miscellaneous Expenses</b>	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
<b>Point to Point Microwave (STL/ICR)</b>	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 VAXTE-3L	\$198,078.79	\$198,078.79		\$0.00	
Low VHF - Air Cooled Solid State Transmitter 3.0 kW	<i>\$188,078.79</i>	\$188,078.79	See attached equipment quotation from SCMS, Inc.	N/A	N/A
Transmitter Building Site Survey /Installation	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Sub-total	\$198,078.79	\$198,078.79	N/A	\$0.00	N/A
Total for all systems	\$331,331.29	\$368,194.51	N/A	\$14,003.00	N/A

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
<b>Primary Antenna ATC-BDH20-4</b>	<b>\$22,430.00</b>	<b>\$36,719.72</b>		<b>\$0.00</b>	
Transmission Line Iso-Coupler	<i>\$4,080.00</i>	\$4,080.00	N/A	N/A	N/A
Sweep test of transmission line and antenna	\$5,730.00	\$5,730.00	N/A	N/A	N/A
Side Mount antenna brackets	\$4,625.00	\$4,625.00	N/A	N/A	N/A
Low-VHF, Low Power, Yagi/Cross dipole/Log Periodic Transmit antenna	\$1,095.00	\$15,384.72	See attached SCMC, Inc. quotation for the antenna system. The antenna is a single channel (not broadband) 2-bay Omni, nondirectional panel antenna, 3 around requiring triangular mounts, i.e., 2-bays (3 x 2 panels in all).	N/A	N/A

Elbow complex, single channel, 1 5 /8" input (if needed)	\$6,900.00	\$6,900.00	N/A	N/A	N/A
<b>Sub-total</b>	\$22,430.00	\$36,719.72	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$331,331.29	\$368,194.51	N/A	\$14,003.00	N/A

## Components

Information not provided.

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	\$56,190.00		\$0.00	
Tower Rigging Short Tower (less than 500')	\$56,190.00	\$56,190.00	Tower Rigging to remove and replace existing antenna - remove old antenna, install new antenna.	N/A	N/A
Sub-total	\$56,190.00	\$56,190.00	N/A	\$0.00	N/A
Total for all systems	\$331,331.29	\$368,194.51	N/A	\$14,003.00	N/A

Components

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
<b>Outside Professional Services</b>	<b>\$47,572.50</b>	<b>\$72,156.00</b>		<b>\$14,003.00</b>	
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	\$609.50	N/A
Prepare request for Special Temporary Authorization	\$2,560.00	\$2,560.00	N/A	\$1,184.00	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

Project management of the transition	\$5,275.00	\$25,360.00	Additional expenses are expected as described in the attached quote.	N/A	N/A
Tower Structural Engineering Study	<b>\$10,000.00</b>	\$10,000.00	Tower mapping and structural engineering study of the existing tower, as a result of the change in tower loading, Addition of the displacement channel 4 panel antenna on the structure.	N/A	N/A
RF Consultant Project Review	<b>\$2,500.00</b>	\$2,500.00	RF Consulting Engineering review of equipment selection, assistance in technical matters concerning FCC rule compliance and product suitability. Estimated 10 hours at \$250 /hr.	N/A	N/A

Additional Displacement Legal Services Not Otherwise Specified in Form 399	<b>\$5,000.00</b>	\$5,000.00	N/A	\$3,898.50	N/A
RF Consultant Prepare Engineering STA	<b>\$1,500.00</b>	\$1,500.00	Prepare Engineering STA for interim antenna operation and supporting application material	N/A	N/A
RF Consultant Form 399	<b>\$1,500.00</b>	\$1,500.00	Review of RF related items for inclusion in form 399 estimates.	N/A	N/A
Additional Field Engineering Service, 1 Days	<b>\$3,500.00</b>	\$3,500.00	AM antenna proof or antenna impedance adjustment estimated at 1-day on-site, including travel if needed. The facility is co-located on AM radiator /tower.	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	<b>\$4,470.00</b>	\$4,470.00	N/A	N/A	N/A

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$2,850.00	Additional expenses were incurred as indicated in the attached invoices.	\$2,850.00	Additional expenses were incurred as indicated in the attached invoices.
Perform engineering study for displacement application	\$1,800.00	\$1,800.00	N/A	N/A	N/A
Prepare/ Review 399 reimbursement form	\$1,710.00	\$5,461.00	Additional expenses were incurred as indicated in the attached invoices.	\$5,461.00	Additional expenses were incurred as indicated in the attached invoices.
<b>Sub-total</b>	\$47,572.50	\$72,156.00	N/A	\$14,003.00	N/A
<b>Total for all systems</b>	\$331,331.29	\$368,194.51	N/A	\$14,003.00	N/A

## Components

Actual Information	
Description	File Name
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	<div> <div>Component Description:</div> <div>Prepare and File Displacement Construction Permit Application</div> <div>Amount:</div> <div>\$609.50</div> </div>

Prepare request for Special Temporary Authorization	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Prepare and file silent STA extension and waiver request.</p> <p>\$1,184.00</p>
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Project management of the transition	Information not provided.	
Tower Structural Engineering Study	Information not provided.	
RF Consultant Project Review	Information not provided.	
Additional Displacement Legal Services Not Otherwise Specified in Form 399	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Additional Displacement Legal Services Not Otherwise Specified in Form 399</p> <p>\$811.50</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Additional Displacement Legal Services Not Otherwise Specified in Form 399</p> <p>\$255.00</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Additional Displacement Legal Services Not Otherwise Specified in Form 399</p> <p>\$317.50</p>



	<b>Component Description:</b>  <b>Amount:</b>	Additional Displacement Legal Services Not Otherwise Specified in Form 399 \$1,530.00
	<b>Component Description:</b>  <b>Amount:</b>	Additional Displacement Legal Services Not Otherwise Specified in Form 399 \$85.00
	<b>Component Description:</b>  <b>Amount:</b>	Additional Displacement Legal Services Not Otherwise Specified in Form 399 \$42.50
	<b>Component Description:</b>  <b>Amount:</b>	Additional Displacement Legal Services Not Otherwise Specified in Form 399 \$857.00
RF Consultant Prepare Engineering STA	Information not provided.	
RF Consultant Form 399	Information not provided.	
Additional Field Engineering Service, 1 Days	Information not provided.	
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.	

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<div> <b>Component Description:</b> Prepare engineering section of Displacement Construction Permit</div> <div> <b>Amount:</b> \$2,850.00</div>
Perform engineering study for displacement application	Information not provided.
Prepare/ Review 399 reimbursement form	<div> <b>Component Description:</b> Prepare/ Review 399 reimbursement form</div> <div> <b>Amount:</b> \$620.50</div> <div> <b>Component Description:</b> Prepare/ Review 399 reimbursement form</div> <div> <b>Amount:</b> \$3,880.50</div> <div> <b>Component Description:</b> Prepare/ Review 399 reimbursement form</div> <div> <b>Amount:</b> \$960.00</div>

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	\$7,060.00	\$5,050.00		\$0.00	
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$1,800.00</i>	\$1,800.00	N/A	N/A	N/A
AM Pattern Disturbance -- Impact study	\$5,260.00	\$3,250.00	N/A	N/A	N/A
Sub-total	\$7,060.00	\$5,050.00	N/A	\$0.00	N/A
Total for all systems	\$331,331.29	\$368,194.51	N/A	\$14,003.00	N/A

Components

Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$331,331.29	\$368,194.51
			\$14,003.00

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.	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	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.	
		<ol style="list-style-type: none"> <li>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.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>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.</li> </ol>	

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><b>Debra C Jones</b>  <i>Vice President for University Advancement</i></p> <p>11/24/2020</p>

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"> <li>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.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	



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><b>Debra C Jones</b>  <i>Vice President for University Advancement</i></p> <p>11/24/2020</p>

## Attachments