



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility	74373	Service:	LPD	Call	WOIW-LD	Channel:	17 (UHF)
ID:		Sign:					
File	0000086297						
Number:							
FRN:	0004378071	Eligibility	Eligible	Date	09/15		
		Status:		Submitted:	/2020		

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
American Christian Television Services, Inc.	1844 Baty Road Lima, OH 45807 United States	+1 (419) 339-4444	kbowers@wtlw.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
The Preparer is same as the reimbursement contact.			

Broadcaster Information and Transition Plan

Question	Response
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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	WOIW-LD has transitioned from channel 23 to channel 17 and is operating with a license to operate.

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	AT7120
	Year	2012
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	120 W

**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	UAXTE-4R37
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	2173 W
	Justification for New Transmitter	The existing transmitter is not capable of being tuned to channel 17 and cannot meet the requirements of the displacement construction permit. The existing output mask filter is channel-specific and must be replaced to accommodate the new channel.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Other Transmitter Costs		

	Does the transmitter installation require a Transmitter Building Site Survey /Installation?	No
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	No
HVAC Service	Does the replacement transmitter require HVAC Service?	No
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	Not in Stack
	Polarization	Horizontal
	Type	Other
	Other Antenna Type	Cone
	ERP: (Effective Radiated Power)	3.0 kW
	Manufacturer	
	Model	Ultra Blaster
	Year	1992

**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?	No
	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	Elliptical
	Type	Slotted Coaxial
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	TLP-16A/VP
	Year	2019
	Justification for New Antenna	The replaced antenna was designed for channel 23 and would not work for channel 17.

**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

Name		Description
Parts Shipping		Additional shipping for component parts.
Antenna Shipping		Shipment of antenna from Dielectric.

Transmission Line

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

Primary
Transmission Line

Existing Transmission Line

Section	Question	Response
Existing Transmission Line Description	Type of change	Purchase New
	Use	Primary (Main)
	Ownership	Owned
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	Flexible Foam
	Diameter	1 5/8 inches
	Number of parallel runs	1
	Length	623 feet per run

Primary **New Transmission Line**
Transmission Line **Section**

Section	Question	Response
New Transmission Line Costs	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Flexible Air
	Diameter	3 inches
	Number of parallel runs	1
	Length	125 feet per run
	Justification for New Transmission Line	125 ft purchased to extend existing and reusable 2.25" line on tower.
Interior RF Systems	Does the Installation of the Transmission Line require an additional or replacement Inside RF system including switching, patch panels, and dehydrators?	No

Primary **Other Transmission Line Expenses Not Listed**
Transmission Line **None**

Information not provided.

**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	Yes
	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	1012894
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	40° 45' 47.0" N-
	Longitude (NAD83)	084° 11' 01.0" W-
	Overall Structure Height	720.14 feet
	Support Structure Height	660.10 feet
	Ground Elevation Above Mean Sea Level (AMSL)	826.76 feet

	Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
	Tower Owner	American Christian Television Services Inc.
	Date Constructed	02/27/2019

**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
1222	WTLW	DTV
74294	WWSR	FM

Other Types of Users

Users
Internet Provid
Radio Communica

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

Name	Description
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**Outside
Professional**

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	No
Outside RF consulting Engineering Services	Perform engineering study for displacement application	No
	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	No
	Prepare request for Special Temporary Authority	No
	Prepare Form 601	No
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
	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

RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No

Outside Professional Services Costs **Other Professional Services Expenses Not Listed**
Services not provided.

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	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)?	No
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
	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

Name	Description
Removal of Previous Antenna	Removal of old antenna and transmission line.

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-4R37	\$84,000.00	\$83,387.17		\$83,387.17	
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$84,000.00	\$83,387.17	N/A	\$83,387.17	As per GatesAir Invoices
Sub-total	\$84,000.00	\$83,387.17	N/A	\$83,387.17	N/A
Total for all systems	\$326,038.47	\$205,109.76	N/A	\$205,379.70	N/A

Components

Actual Information Description	File Name
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UHF - Air Cooled Solid State
Transmitter 1 - 2.5 kW

Component Description: UAXTE-4R37
Transmitter
Amount: \$28,348.93

Component Description: Transmitter
Shipping
Amount: \$1,663.00

Component Description: Parts Shipping
Amount: \$752.78

Component Description: UAXTE-4R37
Transmitter
Amount: \$26,311.23

Component Description: UAXTE-4R37
Transmitter
Amount: \$26,311.23

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 TLP-16A/VP	\$53,253.47	\$50,993.90		\$51,263.84	
UHF-Low Power, Side Mount, Slotted Coaxial, 15.0 kW input, Elliptical	<i>\$43,732.14</i>	\$43,732.14	N/A	\$43,732.14	VPOL
Parts Shipping	<i>\$281.33</i>	\$281.33	N/A	\$281.33	N/A
Sweep test of transmission line and antenna	\$5,730.00	\$3,470.43	N/A	\$3,740.37	N/A
Antenna Shipping	<i>\$3,510.00</i>	\$3,510.00	N/A	\$3,510.00	N/A
Sub-total	\$53,253.47	\$50,993.90	N/A	\$51,263.84	N/A
Total for all systems	\$326,038.47	\$205,109.76	N/A	\$205,379.70	N/A

Components

Actual Information Description	File Name
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UHF-Low Power, Side Mount, Slotted Coaxial, 15.0kW input, Elliptical	<div> <div> Component Description: Amount: </div> <div> Reimbursement for prepayment \$5,183.88 </div> </div> <div> <div> Component Description: Amount: </div> <div> Channel 17 antenna \$18,868.80 </div> </div> <div> <div> Component Description: Amount: </div> <div> Channel 17 antenna \$19,679.46 </div> </div>
Parts Shipping	<div> <div> Component Description: Amount: </div> <div> Expedited shipping \$281.33 </div> </div>
Sweep test of transmission line and antenna	<div> <div> Component Description: Amount: </div> <div> Line Sweep. \$3,740.37 </div> </div>
Antenna Shipping	<div> <div> Component Description: Amount: </div> <div> Shipping and Freight \$3,510.00 </div> </div>

Cost
Information

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
Primary Transmission Line	\$7,375.00	\$6,515.14		\$6,515.14	
Flexible Air Transmission Line - dielectric, 3"	\$7,375.00	\$6,515.14	N/A	\$6,515.14	N/A
Sub-total	\$7,375.00	\$6,515.14	N/A	\$6,515.14	N/A
Total for all systems	\$326,038.47	\$205,109.76	N/A	\$205,379.70	N/A

Components

Actual Information	
Description	File Name
Flexible Air Transmission Line - dielectric, 3"	Component Description:
	125 ft of heliax to extend repurposed existing line.
	Amount:
	\$2,931.81
	Component Description:
	3" Heliax to extend 125 ft to existing transmission line
	Amount:
	\$3,583.33

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	\$166,250.00	\$50,200.00		\$50,200.00	
Tower Rigging Tall Tower (greater than 500')	\$157,750.00	\$41,700.00	N/A	\$41,700.00	N/A
Structural Analysis	<i>\$8,500.00</i>	\$8,500.00	N/A	\$8,500.00	N/A
Sub-total	\$166,250.00	\$50,200.00	N/A	\$50,200.00	N/A
Total for all systems	\$326,038.47	\$205,109.76	N/A	\$205,379.70	N/A

Components

Actual Information Description	File Name
Tower Rigging Tall Tower (greater than 500')	<div><div>Component Description:</div><div>Amount:</div><div>Component Description:</div><div>Amount:</div></div> <div>Transmission Line and Antenna Install \$13,900.00 Antenna and transmission line installation. \$27,800.00</div>

Structural Analysis	Component Description:	Tower inspection and analysis
	Amount:	\$8,500.00

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	\$10,650.00	\$9,503.55		\$9,503.55	
Prepare/ Review 399 reimbursement form	\$1,710.00	\$1,414.80	N/A	\$1,414.80	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$3,025.00	\$1,607.50	N/A	\$1,607.50	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$2,235.00	\$3,873.75	N/A	\$3,873.75	Adjusted invoice 1516076 to correct amount.
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$1,050.00	N/A	\$1,050.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$1,577.50	\$1,557.50	N/A	\$1,557.50	N/A
Sub-total	\$10,650.00	\$9,503.55	N/A	\$9,503.55	N/A

Total for all systems	\$326,038.47	\$205,109.76	N/A	\$205,379.70	N/A
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Components

Actual Information		
Description	File Name	
Prepare/ Review 399 reimbursement form	Component Description:	Form 399 Review
	Amount:	\$213.75
	Component Description:	Form 300 Review
	Amount:	\$1,201.05
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description:	Displacement CP Application
	Amount:	\$613.75
	Component Description:	Eve Reed, Attorney, 1 hour
	Amount:	\$795.00
	Component Description:	Eve Reed, Attorney .25 hours
	Amount:	\$198.75
	Component Description:	Displacement CP Application
	Amount:	\$198.75

<p>Attorney Fees - Prepare and File request for Special Temporary Authorization</p>	<table> <tr> <td data-bbox="713 174 1023 210">Component Description:</td><td data-bbox="1155 174 1289 244">STA Legal Assistance:</td></tr> <tr> <td data-bbox="713 255 823 291">Amount:</td><td data-bbox="1155 255 1251 291">\$907.50</td></tr> <tr> <td data-bbox="713 394 1023 430">Component Description:</td><td data-bbox="1155 394 1353 430">STA legal review</td></tr> <tr> <td data-bbox="713 434 823 470">Amount:</td><td data-bbox="1155 434 1251 470">\$111.25</td></tr> <tr> <td data-bbox="713 573 1023 609">Component Description:</td><td data-bbox="1155 573 1362 680">Eve Reed .35 hours at \$795 per hour</td></tr> <tr> <td data-bbox="713 692 823 728">Amount:</td><td data-bbox="1155 692 1251 728">\$198.75</td></tr> <tr> <td data-bbox="713 831 1023 866">Component Description:</td><td data-bbox="1155 831 1342 866">STA Application</td></tr> <tr> <td data-bbox="713 871 823 907">Amount:</td><td data-bbox="1155 871 1273 907">\$2,656.25</td></tr> </table>	Component Description:	STA Legal Assistance:	Amount:	\$907.50	Component Description:	STA legal review	Amount:	\$111.25	Component Description:	Eve Reed .35 hours at \$795 per hour	Amount:	\$198.75	Component Description:	STA Application	Amount:	\$2,656.25
Component Description:	STA Legal Assistance:																
Amount:	\$907.50																
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Component Description:	Eve Reed .35 hours at \$795 per hour																
Amount:	\$198.75																
Component Description:	STA Application																
Amount:	\$2,656.25																
<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="713 1039 1023 1075">Component Description:</td><td data-bbox="1155 1039 1378 1146">Engineering for construction permit application.</td></tr> <tr> <td data-bbox="713 1158 823 1193">Amount:</td><td data-bbox="1155 1158 1273 1193">\$1,050.00</td></tr> </table>	Component Description:	Engineering for construction permit application.	Amount:	\$1,050.00												
Component Description:	Engineering for construction permit application.																
Amount:	\$1,050.00																
<p>Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application</p>	<table> <tr> <td data-bbox="713 1330 1023 1366">Component Description:</td><td data-bbox="1155 1330 1378 1400">License to Operate Application</td></tr> <tr> <td data-bbox="713 1411 823 1447">Amount:</td><td data-bbox="1155 1411 1273 1447">\$1,557.50</td></tr> </table>	Component Description:	License to Operate Application	Amount:	\$1,557.50												
Component Description:	License to Operate Application																
Amount:	\$1,557.50																

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	\$4,510.00	\$4,510.00		\$4,510.00	
Removal of Previous Antenna	<i>\$4,510.00</i>	\$4,510.00	N/A	\$4,510.00	N/A
Sub-total	\$4,510.00	\$4,510.00	N/A	\$4,510.00	N/A
Total for all systems	\$326,038.47	\$205,109.76	N/A	\$205,379.70	N/A

Components

Actual Information	
Description	File Name
Removal of Previous Antenna	<div>Component Description: Removal of previous transmission line and antenna.</div> <div>Amount: \$4,510.00</div>

**Cost
Information**

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$326,038.47	\$205,109.76	\$205,379.70

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.	Yes

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>Kevin Bowers <i>President</i></p> <p>09/15/2020</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"> 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>Kevin Bowers <i>President</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.

Kevin Bowers
President

09/15/2020

Attachments