



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **167356** | Service: **LPT** | Call **W41DK-D** | Channel: **16 (UHF)**  
ID: | Sign:  
File **0000089418**  
Number:  
FRN: **0002017572** | Eligibility **Eligible** | Date **10/15**  
Status: | Submitted: **/2021**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>WEST VIRGINIA EDUCATIONAL BROADCASTING AUTHORITY</b>	Scott Finn 600 CAPITOL STREET CHARLESTON, WV 25301 United States	+1 (304) 556-4903	sfinn@wvpublic.org	Government Entity

## 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>Robert Gehman</b> <i>ConsultingEngineer</i> <i>Kessler and Gehman Associates, Inc.</i>	Robert Gehman 507 NW 60 Street Suite D Gainesville, FL 32607 United States	+1 (352) 332-3157	bob@kesslerandgehman.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	Replace transmitter, mask filter, antenna, transmission line, including rigging for installation.

**Transmitters**

Section	Question	Response
Transmitter Related Expenses	Do you have transmitter related expenses?	Yes

**Primary  
Transmitter**

**Existing Transmitter Information**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Existing Transmitter Description</b>	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	LU400ATD
	Year	2009
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	0.4 kW

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	UAXTE-1
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	0.6 kW
	Justification for New Transmitter	To accommodate change in channels from 41 to 16

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Other Transmitter Costs</b>	Does the transmitter installation require a Transmitter Building Site Survey /Installation?	No
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	Yes
	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**      **Other Transmitter Cost Not Listed**  
**Transmitter**      Information not provided.

**Antennas**

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

**Primary  
Antenna****Existing Antenna Information**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<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?	Yes
	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	Horizontal
	Type	Slotted Coaxial
	ERP: (Effective Radiated Power)	7.0 kW
	Manufacturer	
	Model	TUA-C3-06 /18U-T
	Year	2008

**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	Horizontal
	Type	Slotted Coaxial
	ERP: (Effective Radiated Power) .....	15.0 kW
	Manufacturer	
	Model	DLP-8B
	Year	2019
Justification for New Antenna	To accommodate change in channels from 41 to 16	

**Primary  
Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No
<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?	Yes
<b>Sweep Test</b>	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?	Yes

**Primary  
Transmission  
Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	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
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Flexible Air
	Diameter	1 5/8 inches
	Number of parallel runs	1
	Length	100 feet per run

**Primary  
Transmission  
Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Flexible Air
	Diameter	1 5/8 inches
	Number of parallel runs	1
	Length	100 feet per run
	Justification for New Transmission Line	To accommodate change in channels from 41 to 16
<b>Interior RF Systems</b>	Does the Installation of the Transmission Line require an additional or replacement Inside RF system including switching, patch panels, and dehydrators?	Yes

**Primary  
Transmission  
Line**

**Other Transmission Line Expenses Not Listed**

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
<b>Existing Tower Description</b>	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Ownership	Owned
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	No
	Is tower documented for structural analysis?	Unknown
	Is tower compliant with Rev G?	Unknown
<b>Existing Tower Structure Registration</b>	Do you have a tower registration number?	No
<b>Coordinates (NAD83 (North American Datum of 1983))</b>	Latitude (NAD83)	39° 22' 55.3" N-
	Longitude (NAD83)	079° 04' 45.1" W-
	Overall Structure Height	105.00 feet
	Support Structure Height	105.00 feet
	Ground Elevation Above Mean Sea Level (AMSL)	3061.00 feet
	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	WEST VIRGINIA EDUCATIONAL BROADCASTING AUTHORITY
	Date Constructed	01/01/2008

**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**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	12
	Explanation	Review progress, prepare and submit Form 387 quarterly, as well as three special FCC required reports
<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	1
	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	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	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No

**Other Professional Services Expenses Not Listed**

**Outside Professional Services Costs**

Name	Description
<b>Antenna selection analysis</b>	Antenna selection analysis
<b>FAA</b>	FAA 7460-1 to notify of height or location change and/or frequency and power change.
<b>Other Engineering Services</b>	Engineering services not otherwise included in the Form 399 services
<b>Other Legal Services</b>	Other Legal Services
<b>ASR</b>	ASR Modification



**Other Expenses**

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	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?	Yes
	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
<b>Primary Transmitter UAXTE-1</b>	<b>\$66,300.00</b>	<b>\$66,300.00</b>		<b>\$0.00</b>	
Switchgear - industrial 800 amp	\$38,200.00	\$38,200.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 320 - 700 Watts	\$28,100.00	\$28,100.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$66,300.00</b>	<b>\$66,300.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$279,781.25</b>	<b>\$282,228.75</b>	<b>N/A</b>	<b>\$26,012.75</b>	<b>N/A</b>

**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 DLP-8B</b>	<b>\$70,355.00</b>	<b>\$70,355.00</b>		<b>\$0.00</b>	
Pattern scatter analysis for side mount (if not included in antenna base cost)	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Side Mount antenna brackets	\$4,625.00	\$4,625.00	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
UHF-Low Power, Side Mount, Slotted Coaxial, 15.0 kW input, Horizontal	<i>\$50,000.00</i>	\$50,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$70,355.00</b>	<b>\$70,355.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$279,781.25</b>	<b>\$282,228.75</b>	<b>N/A</b>	<b>\$26,012.75</b>	<b>N/A</b>

**Components**

Information not provided.

**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
<b>Primary Transmission Line</b>	<b>\$13,300.00</b>	<b>\$13,300.00</b>		<b>\$0.00</b>	
Interior RF Systems: Inside RF system including switching, patch panels and dehydrators	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Flexible Air Transmission Line - dielectric, 1 5 /8"	\$3,300.00	\$3,300.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$13,300.00</b>	<b>\$13,300.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$279,781.25</b>	<b>\$282,228.75</b>	<b>N/A</b>	<b>\$26,012.75</b>	<b>N/A</b>

**Components**

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
<b>Primary Tower TOWER</b>	<b>\$56,190.00</b>	<b>\$56,190.00</b>		<b>\$0.00</b>	
Tower Rigging Short Tower (less than 500')	\$56,190.00	\$56,190.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$56,190.00</b>	<b>\$56,190.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$279,781.25</b>	<b>\$282,228.75</b>	<b>N/A</b>	<b>\$26,012.75</b>	<b>N/A</b>

**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>\$53,636.25</b>	<b>\$56,083.75</b>		<b>\$26,012.75</b>	
Other Legal Services	<i>\$15,987.75</i>	\$15,987.75	N/A	\$15,987.75	The amounts are the same.
ASR	<i>\$550.00</i>	\$550.00	ASR Modification	N/A	N/A
Other Engineering Services	<i>\$10,000.00</i>	\$10,000.00	Engineering services not otherwise included in the Form 399 services	N/A	N/A
FAA	<i>\$550.00</i>	\$550.00	FAA 7460-1 to notify of height or location change and /or frequency and power change.	N/A	N/A
Antenna selection analysis	<i>\$500.00</i>	\$500.00	See attached / uploaded PDF file titled "KGA 575-349 v210720jgv1.pdf"	\$500.00	N/A

Attorney Fees - Prepare and File request for Special Temporary Authorization	\$2,235.00	\$2,235.00	N/A	N/A	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	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
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$3,500.00	See attached / uploaded PDF file titled "KGA 575-345 v210712jgv1. pdf"	\$3,500.00	N/A
Prepare request for Special Temporary Authorization	\$1,280.00	\$1,280.00	N/A	N/A	N/A

Perform engineering study for displacement application	\$1,800.00	\$2,000.00	See attached / uploaded PDF file titled "KGA 575-345 v210712jgv1.pdf"	\$2,000.00	N/A
Form 399 assistance or other Program Management costs	<i>\$10,000.00</i>	\$10,000.00	N/A	\$1,465.00	N/A
Prepare/ Review 399 reimbursement form	\$1,710.00	\$2,560.00	See attached invoice	\$2,560.00	N/A
Project management of the transition	\$1,266.00	\$1,266.00	N/A	N/A	N/A
<b>Sub-total</b>	\$53,636.25	\$56,083.75	N/A	\$26,012.75	N/A
<b>Total for all systems</b>	\$279,781.25	\$282,228.75	N/A	\$26,012.75	N/A

## Components

Actual Information	
Description	File Name
Other Legal Services	<p><b>Component Description:</b> Akin Gump 1921363 v211015pmv1</p> <p><b>Amount:</b> \$326.25</p> <p><b>Component Description:</b> Akin Gump 1933657 v211015pmv1</p> <p><b>Amount:</b> \$364.00</p>



**Component Description:** Akin Gump  
1892904  
v210924pmv1  
**Amount:** \$292.50

**Component Description:** Akin Gump  
1752346  
v210921pmv1  
**Amount:** \$660.60

**Component Description:** Akin Gump  
1754986  
v210921pmv1  
**Amount:** \$1,308.10

**Component Description:** Akin Gump  
1896557  
v211007pmv1  
**Amount:** \$268.00

**Component Description:** Akin Gump  
1884346  
v210929pmv1  
**Amount:** \$964.90

**Component Description:** Akin Gump  
1837421  
v210916pmv1  
**Amount:** \$490.00

**Component Description:** Akin Gump  
1946182  
v211006pmv1  
**Amount:** \$4,576.00

**Component Description:** Akin Gump  
1861785  
v210921pmv1  
**Amount:** \$567.00

**Component Description:** Akin Gump  
1871871  
v210916pmv1  
**Amount:** \$1,345.70

**Component Description:** Akin Gump  
1860580  
v210921pmv1  
**Amount:** \$522.50

**Component Description:** Akin Gump  
1884714  
v210916pmv1  
**Amount:** \$70.00

**Component Description:** Akin Gump  
1876113  
v210924pmv1  
**Amount:** \$177.03

**Component Description:** Akin Gump  
1757561  
v210925pmv1  
**Amount:** \$508.00

**Component Description:** Akin Gump  
1810563  
v210922pmv1  
**Amount:** \$213.50

**Component Description:** Akin Gump  
1851312  
v210916pmv1  
**Amount:** \$536.66

**Component Description:** Akin Gump  
1815033  
v210921pmv1  
**Amount:** \$704.90

**Component Description:** Akin Gump  
1800723  
v210921pmv1  
**Amount:** \$170.80

**Component Description:** Akin Gump  
1746414  
v210925pmv1  
**Amount:** \$190.50

**Component Description:** Akin Gump  
1770885  
v210925pmv1  
**Amount:** \$1,041.50

**Component Description:** Akin Gump  
1867941  
v210916pmv1  
**Amount:** \$75.67

**Component Description:** Akin Gump  
1838742  
v210922pmv1  
**Amount:** \$109.94

	<p><b>Component Description:</b> Akin Gump 1779185 v211005pmv2</p> <p><b>Amount:</b> \$313.20</p>
	<p><b>Component Description:</b> Akin Gump 1742362 v210916pmv1</p> <p><b>Amount:</b> \$190.50</p>
ASR	Information not provided.
Other Engineering Services	Information not provided.
FAA	Information not provided.
Antenna selection analysis	<p><b>Component Description:</b> KGA 575-349 v210720jgv1</p> <p><b>Amount:</b> \$500.00</p>
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
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	Information not provided.
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<p><b>Component Description:</b> KGA 575-345 v210712jgv1</p> <p><b>Amount:</b> \$3,500.00</p>

Prepare request for Special Temporary Authorization	Information not provided.
Perform engineering study for displacement application	<p><b>Component Description:</b> KGA 575-345 v210712jgv1</p> <p><b>Amount:</b> \$2,000.00</p>
Form 399 assistance or other Program Management costs	<p><b>Component Description:</b> KGA 575-436 v210813jgv1</p> <p><b>Amount:</b> \$215.00</p> <p><b>Component Description:</b> KGA 575-406 v200814pmv1</p> <p><b>Amount:</b> \$1,250.00</p>
Prepare/ Review 399 reimbursement form	<p><b>Component Description:</b> KGA 575-412 v200814pmv1b</p> <p><b>Amount:</b> \$2,560.00</p>
Project management of the transition	Information not provided.

**Cost Information**

**Other Expenses**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$20,000.00</b>	<b>\$20,000.00</b>		<b>\$0.00</b>	
Equipment Delivery and Handling Charges	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$20,000.00</b>	<b>\$20,000.00</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$279,781.25</b>	<b>\$282,228.75</b>	N/A	<b>\$26,012.75</b>	N/A

**Components**

Information not provided.

**Cost Information** **Grand Total**

	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>	<b>Actual Cost</b>
<b>Total for all systems</b>	\$279,781.25	\$282,228.75	\$26,012.75

**Reimbursement Status**

<b>Question</b>	<b>Response</b>
The facility has ceased operating on its pre-auction channel.	No
Construction of final facilities or all necessary modifications are complete.	No
All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator.	No

Certification	Section	Question	Response
	<b>Submission of Estimated Expenses Statements</b>	<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"> <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.

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.

**Jeffrey C  
Gehman**  
*Engineering  
Associate*

10/15/2021

Certification	Section	Question	Response
	<b>Submission of Actual Cost Documentation Statements</b>	<p>WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).</p>	
		<ol style="list-style-type: none"> <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>Jeffrey C Gehman</b> <i>Engineering Associate</i></p> <p>10/15/2021</p>

**Attachments**