



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility	<b>66788</b>	Service:	<b>LPT</b>	Call	<b>K18NH-D</b>	Channel:	<b>18 (UHF)</b>
ID:		Sign:					
File	<b>0000087766</b>						
Number:							
FRN:	<b>0014361620</b>	Eligibility	<b>Eligible</b>	Date	<b>03/04</b>		
		Status:		Submitted:	<b>/2021</b>		

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>KIRO-TV, INC.</b> Doing Business As: KIRO-TV, INC.	Chief Engineer 2807 THIRD AVENUE SEATTLE, WA 98121 United States	+1 (206) 728-7777	knealey@kIRO7. 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
<b>Keith Nealey</b> <i>Engineering Manager</i> <i>KIRO-TV, Inc</i>	Chief Engineer 2807 THIRD AVENUE SEATTLE, WA 98121 United States	+1 (206) 728- 7777	knealey@kIRO7. 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	New 220v power circuits will be installed with existing 110v circuits. We will install new transmitter and antenna alongside existing equipment. Once testing is completed we will move existing feed line onto new transmitter and antenna.

**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	MX100U
	Year	2005
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	100 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-2P- C 400w
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	400 W
	Justification for New Transmitter	The current LPTV Translator is outside the spectrum that will be allocated to broadcast television following the spectrum repack.

**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	Yes
	Description	Add 220V breakers and outlets to existing service panel
<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?	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	Top
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	1
	Number of Panels	2
	Design power capacity in use	100.0 %
	Lower Limit	680.00 MHz
	Upper Limit	686.00 MHz
	ERP: (Effective Radiated Power) .....	2.2 kW
	Manufacturer	
	Model	4DR-16-S
	Year	2009

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	Top
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	1
	Number of Panels/Bays	4
	Lower Limit	470.00 MHz
	Upper Limit	500.00 MHz
	Design power capacity in use	100.0 %
	ERP: (Effective Radiated Power)	4.4 kW
	Manufacturer	
	Model	4DR-4S
	Year	2018



	Justification for New Antenna	Current channel 49 antenna is outside the assigned broadcast frequencies post repack and cannot be retuned.
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**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?	No
<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?	No
<b>Power Dividers</b>	Does the panel antenna require power dividers?	Yes
	Number of Power Dividers	1
<b>Cable Harness</b>	Does the panel antenna require cable harness?	No

**Primary Antenna**

**Other Antenna Cost Not Listed**

Name	Description
<b>Scala Connectors</b>	Antenna-specific connectors

**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

**Outside  
Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	100
	Explanation	K18NH-D does not have sufficient resource capacity and expertise in house to handle all of the reimbursement filing, vendor coordination, progress reporting, budget creation, budget review, budget tracking, and all other activities necessary
<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	No
	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	Yes
	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	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	No

**Outside Professional Services Costs**      **Other Professional Services Expenses Not Listed**

If none were provided.

**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)?	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
<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 UAXTE-2P- C 400w	\$28,501.33	\$28,401.33		\$401.33	
Other Electrical Service: Add 220V breakers and outlets to existing service panel	<i>\$401.33</i>	\$401.33	The estimated cost has been adjusted to include all invoices submitted for reimbursement at this time.	\$401.33	N/A
UHF - Air Cooled Solid State Transmitter 320 - 700 Watts	\$28,100.00	\$28,000.00	N/A	\$0.00	N/A
Sub-total	\$28,501.33	\$28,401.33	N/A	\$401.33	N/A
Total for all systems	\$185,842.90	\$65,202.10	N/A	\$30,615.51	N/A

Components

Actual Information	
Description	File Name
Other Electrical Service: Add 220V breakers and outlets to existing service panel	<div>Component Description: Installation of 250v panel, breakers and outlets</div> <div>Amount: \$401.33</div>

UHF - Air Cooled Solid State Transmitter 320 - 700 Watts	<div><div><b>Component Description:</b></div><div>Cost of transmitter, mask, connection kit, plus freight and tax</div></div> <div><b>Amount:</b> \$26,310.29</div>
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## 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 4DR-4S</b>	<b>\$9,136.57</b>	<b>\$5,532.89</b>		<b>\$5,532.89</b>	
UHF Broadband panel antenna (per panel), horizontally-polarized	\$7,000.00	\$3,948.63	The estimated cost has been adjusted to include all invoices submitted for reimbursement at this time	\$3,948.63	Freight and tax added
Scala Connectors	<b>\$836.57</b>	\$836.57	Please see Estimated Cost Justification K18NH-D-210-Primary Antenna - Scala Connectors v0	\$836.57	N/A
Power Dividers (each, for panel antenna system, if not included in antenna cost)	\$1,300.00	\$747.69	The estimated cost has been adjusted to include all invoices submitted for reimbursement at this time	\$747.69	N/A
<b>Sub-total</b>	<b>\$9,136.57</b>	<b>\$5,532.89</b>	N/A	<b>\$5,532.89</b>	N/A
<b>Total for all systems</b>	<b>\$185,842.90</b>	<b>\$65,202.10</b>	N/A	<b>\$30,615.51</b>	N/A

### Components



Actual Information	
Description	File Name
UHF Broadband panel antenna (per panel), horizontally-polarized	<b>Component Description:</b> Scala Antennas, plus freight <b>Amount:</b> \$3,948.63
Scala Connectors	<b>Component Description:</b> Antenna: Scala Connectors <b>Amount:</b> \$836.57
Power Dividers (each, for panel antenna system, if not included in antenna cost)	<b>Component Description:</b> Scala antenna-power dividers <b>Amount:</b> \$747.69

**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 POLE	\$56,190.00	\$3,500.00		\$3,249.97	
Tower Rigging Short Tower (less than 500')	\$56,190.00	\$3,500.00	N/A	\$3,249.97	N/A
Sub-total	\$56,190.00	\$3,500.00	N/A	\$3,249.97	N/A
Total for all systems	\$185,842.90	\$65,202.10	N/A	\$30,615.51	N/A

**Components**

Actual Information Description	File Name
Tower Rigging Short Tower (less than 500')	<div>Component Description: Crane, plus removal of old antenna and installation of new antenna</div> <div>Amount: \$3,249.97</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
<b>Outside Professional Services</b>	<b>\$92,015.00</b>	<b>\$27,767.88</b>		<b>\$21,431.32</b>	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$1,200.00	N/A	\$0.00	N/A
Prepare/ Review 399 reimbursement form	\$1,710.00	\$284.50	Please see COMB K18NH-D Prepare /Review 399 Cooley LLP Invoice Budget Revision Justification Letter	\$284.50	N/A
Project management of the transition	\$10,550.00	\$12,483.25	The estimated cost has been adjusted to include all invoices submitted for reimbursement at this time.	\$12,483.25	N/A
RF Exposure Measurements	\$12,100.00	\$500.00	N/A	\$75.00	N/A
Comprehensive coverage verification via field study, if needed	\$52,600.00	\$4,000.00	N/A	\$0.00	N/A

Perform engineering study for displacement application	\$1,800.00	\$6,610.13	Please see Estimated Cost Justification K18NH-D-530-RF Eng - Engineering Study for Displacement Application V0	\$6,610.13	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$2,235.00	\$327.60	Please see COMB K18NH-D Attorney STA Cooley LLP Invoice Budget Revision Justification Letter	\$327.60	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$3,262.50	\$47.10	Please see COMB K18NH-D Attorney Negotiate Lease and Other Matters Budget Revision Cooley LLP Invoice Justification Letter	\$47.10	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$1,577.50	\$615.30	N/A	\$527.40	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$3,025.00	\$1,200.00	N/A	\$1,076.34	N/A

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,052.50	\$500.00	N/A	\$0.00	N/A
<b>Sub-total</b>	\$92,015.00	\$27,767.88	N/A	\$21,431.32	N/A
<b>Total for all systems</b>	\$185,842.90	\$65,202.10	N/A	\$30,615.51	N/A

## Components

Actual Information	
Description	File Name
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<p><b>Component Description:</b> Engineering for CP application - Puyallup Translator portion</p> <p><b>Amount:</b> \$942.86</p>
Prepare/ Review 399 reimbursement form	<p><b>Component Description:</b> (KIRO-TV) Post-Auction Channel Repack</p> <p><b>Amount:</b> \$255.20</p> <p><b>Component Description:</b> Prep 399</p> <p><b>Amount:</b> \$29.30</p>
Project management of the transition	<p><b>Component Description:</b> Project Management</p> <p><b>Amount:</b> \$4,395.00</p> <p><b>Component Description:</b> Project Management</p> <p><b>Amount:</b> \$8,088.25</p>

RF Exposure Measurements	<b>Component Description:</b>	Exposure Measurements
	<b>Amount:</b>	\$75.00
	<b>Component Description:</b>	Engineering for RF Exposure - Puyallup Translator portion
	<b>Amount:</b>	\$75.00
Comprehensive coverage verification via field study, if needed	<b>Component Description:</b>	Engineering for coverage - Puyallup Translator portion
	<b>Amount:</b>	\$3,787.15
Perform engineering study for displacement application	<b>Component Description:</b>	Displacement App.
	<b>Amount:</b>	\$6,610.13
	<b>Component Description:</b>	Engineering study for displacement - Puyallup Translator portion
	<b>Amount:</b>	\$1,655.38
Attorney Fees - Prepare and File request for Special Temporary Authorization	<b>Component Description:</b>	STA
	<b>Amount:</b>	\$29.30
	<b>Component Description:</b>	STA
	<b>Amount:</b>	\$62.80
	<b>Component Description:</b>	STA
	<b>Amount:</b>	\$235.50

Attorney Fees - Negotiation of lease and other matters for shared locations	<div> <b>Component Description:</b> Other Matters </div> <div> <b>Amount:</b> \$47.10 </div>
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	<div> <b>Component Description:</b> License to Cover </div> <div> <b>Amount:</b> \$87.90 </div>
	<div> <b>Component Description:</b> License to Cover </div> <div> <b>Amount:</b> \$439.50 </div>
	<div> <b>Component Description:</b> Legal LTC application - Puyallup Translator portion </div> <div> <b>Amount:</b> \$332.07 </div>
	<div> <b>Component Description:</b> License to Cover </div> <div> <b>Amount:</b> \$87.90 </div>

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<b>Component Description:</b> C.P.A <b>Amount:</b> \$251.20
	<b>Component Description:</b> C.P.A <b>Amount:</b> \$194.26
	<b>Component Description:</b> C.P.A <b>Amount:</b> \$298.30
	<b>Component Description:</b> C.P.A <b>Amount:</b> \$78.50
	<b>Component Description:</b> C.P.A <b>Amount:</b> \$242.36
	<b>Component Description:</b> C.P.A <b>Amount:</b> \$5.86
	<b>Component Description:</b> Legal for CP application - Puyallup Translator portion <b>Amount:</b> \$1,062.15
	<b>Component Description:</b> C.P.A <b>Amount:</b> \$5.86
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	<b>Component Description:</b> Engineering for LTC application - Puyallup Translator portion <b>Amount:</b> \$225.00



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	\$0.00	\$0.00		\$0.00	
Sub-total	\$0.00	\$0.00	N/A	\$0.00	N/A
Total for all systems	\$185,842.90	\$65,202.10	N/A	\$30,615.51	N/A

Components

Information not provided.

<b>Cost Information</b>	<b>Grand Total</b>		
		<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>
			<b>Actual Cost</b>
	<b>Total for all systems</b>	\$185,842.90	\$65,202.10
			\$30,615.51

<b>Reimbursement Status</b>	<b>Question</b>	<b>Response</b>
	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"> <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>Keith Nealey</b>  <i>Director of Engineering</i></p> <p>03/04/2021</p>

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	<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>Keith Nealey</b>  <i>Director of Engineering</i></p> <p>03/04/2021</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"> <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. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>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.</li> </ol>	

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.

**Keith  
Nealey**  
*Director of  
Engineering*

03/04/2021

**Attachments**