



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **10242** | Service: **DTV** | Call **KQCA** | Channel: **23 (UHF)**
ID: | Sign:
File **0000026714**
Number:
FRN: **0001587583** | Date **10/05**
Submitted: **/2017**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
HEARST STATIONS INC.	C/O BROOKS, PIERCE ET AL.	+1 (919) 839-0300	mprak@brookspierce.com	Corporation
Doing Business As: HEARST STATIONS INC.	P.O. BOX 1800 RALEIGH, NC 27602 United States			

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.	Yes
Briefly describe transition plan	see attached transition plan document

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)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter Manufacturer and Type	Manufacturer	
	Model	Sigma CD3200P2
	Year	2005
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	50 kW

**Primary
Transmitter**

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	ULXTE-40
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	25.3 kW
	Justification for New Transmitter	Existing IOT transmitter cannot be converted to post-transition channel, see GatesAir EOL and HTV IOT to Solid-State Justification statements. An IOT replacement is more expensive than proposed SS transmitter. See attached Comark IOT Transmitter quote.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	Yes
	Description	See attached quote for transmitter installation electrical service
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

Primary Transmitter

Other Transmitter Cost Not Listed

Name	Description
Sales Tax	sales tax
RF Accessories	Additional RF components required for transmitter operation and integration into current RF environment
Transmitter de-install	old transmitter removal
Shipping	transmitter shipping
Electrical Accessories	Surge protection required by manufacturer

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	Retune Existing
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Owner	American Tower Corp.
	Site	N/A
	Is the existing antenna shared with another station or stations?	Yes
	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
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Bottom
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	3
	Number of Panels	80
	Design power capacity in use	45.0 %

Lower Limit	502.00 MHz
Upper Limit	678.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	600.0 kW
Manufacturer	Dielectric
Model	DeltastarTUG-05-16/80H-2-B
Year	2003

Facility ID's and Call Signs of all stations with whom the antenna is shared.

Facility ID	Call Sign
51499	KMAX-TV
33875	KCRA-TV

Primary Antenna

Adjustment to Existing Antenna

Section	Question	Response
Sweep Test of Existing Antenna	Do you need a sweep test of existing antenna?	Yes

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	Yes
	Type	Additional Module
	Number of channels supported	3
	Frequencies of channels supported	RF channel
	Frequency	N/A

Enter a list of RF channel numbers.

RF Channel Number
23
24
35

**Primary
Antenna**

Other Antenna Cost Not Listed

Information not provided.

**Auxiliary
Antenna****Existing Antenna Information**

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Auxiliary (Backup)
	Description of Use	backup to main antenna
	Ownership	Owned
	Owner	N/A
	Site	N/A
	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	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Other Antenna Type	N/A

ERP: (Effective Radiated Power)	790.0 kW
Manufacturer	
Model	TFU- 24DSB- C170
Year	2010

Auxiliary Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Auxiliary (Backup)
	Description of Use	Aux and interim use
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Ownership	Owned
	Owner	N/A
	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	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	425.0 kW
	Manufacturer	

Model	TFU-28DSC-RO4
Year	2019
Justification for New Antenna	Current antenna is channel specific and cannot be used on post-transition channel. Antenna must be replaced.

Auxiliary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	7 3/16 inches inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	Yes

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

**Auxiliary
Antenna**

Other Antenna Cost Not Listed

Name	Description
Shipping	Antenna shipping
Sales Tax	Antenna sales tax

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	Utilize Existing
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Owner	American Tower Corp.
	Site	N/A
	Is the existing transmission line shared with another station or stations?	Yes
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	Dielectric
	Type	Rigid
	Diameter	7 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	2200 feet per run

**Facility ID's and Call Signs of
all stations with whom the
transmission line is shared.**

Facility ID	Call Sign
51499	KMAX-TV
33875	KCRA-TV

Primary **Other Transmission Line Expenses Not Listed**
Transmission Line None Information not provided.

Auxiliary
Transmission Line

Existing Transmission Line

Section	Question	Response
Existing Transmission Line Description	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	Backup
	Ownership	Owned
	Owner	N/A
	Site	N/A
	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	Rigid
	Diameter	7 3/16 inches
	Other Diameter	N/A
	Segment Length	19 1/2 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1800 feet per run

Auxiliary
Transmission Line

New Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Auxiliary (Backup)
	Description of Use	backup
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	7 3/16 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1800 feet per run
	Justification for New Transmission Line	Current transmission line segment length is not compatible with post-transition channel and must be replaced.

Auxiliary
Transmission Line

Other Transmission Line Expenses Not Listed

Name	Description
Sales Tax	estimated sales tax based on California and local sales tax rate of 8.25%

Tower Equipment And Rigging Costs

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	Yes

Primary Tower

Existing Tower

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	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?	Yes
	Is tower compliant with Rev G?	Yes
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1015686
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	38° 15' 54.0" N-
	Longitude (NAD83)	121° 29' 28.0" W-
	Overall Structure Height	2000.30 feet
	Support Structure Height	1904.83 feet
	Ground Elevation Above Mean Sea Level (AMSL)	0.00 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	Hearst Stations Inc.
	Date Constructed	10/01/1985

**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
52953	KSPX-TV	DTV
33875	KCRA-TV	DTV
51499	KMAX-TV	DTV

Primary Tower

Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for documented tower
Tower Reinforcements	Please select whether tower reinforcements are needed:	Major 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

Name	Description
Tower Consulting	Tower consulting and tower project management

**Outside
Professional**

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	380
	Explanation	Need RF and design experience not available in-house.
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes

	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Transmitter Site Survey	Transmitter planning survey & transmitter building drawings

Other Expenses

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Facility Expenses	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
Permit and Filing Costs	Local Zoning	No
	Non-zoning permits	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	No
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	No
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
	Does this relocation require Equipment Storage?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

Other Expenses	Other Expenses Not Listed Information not provided.
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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 ULXTE-40	\$1,237,802.00	\$1,116,107.00		\$311,118.13	
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$844,985.00	N/A	\$311,118.13	N/A
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$5,870.00	N/A	N/A	N/A
Other Electrical Service: See attached quote for transmitter installation electrical service	\$69,465.00	\$69,465.00	transmitter installation electrical service per attached quote	N/A	N/A
Electrical Accessories	\$1,943.00	\$1,943.00	Required by transmitter manufacturer. See GatesAir quote.	N/A	N/A
Sales Tax	\$81,133.00	\$81,133.00	sales tax per GatesAir transmitter quote	N/A	N/A
Shipping	\$11,000.00	\$11,000.00	Transmitter shipping	N/A	N/A
Transmitter	\$25,489.00	\$25,489.00	Old	N/A	N/A

de-install			transmitter must be removed in order to completely install replacement. See GatesAir quote		
RF Accessories	\$76,222.00	\$76,222.00	Additional RF components required for replacement transmitter operation. See GatesAir transmitter quote, page 7.	N/A	N/A
Sub-total	\$1,237,802.00	\$1,116,107.00	N/A	\$311,118.13	N/A
Total for all systems	\$2,988,107.00	\$2,367,653.00	N/A	\$311,118.13	N/A

Components

Actual Information	
Description	File Name
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	<p>Component Description: Deposit on Transmitter</p> <p>Amount: \$95,853.94</p> <p>Component Description: Second Deposit on Transmitter</p> <p>Amount: \$215,264.19</p>
Transformer 3 phase/480v - 150 KVA	Information not provided.
Other Electrical Service: See attached quote for transmitter installation electrical service	Information not provided.
Electrical Accessories	Information not provided.

Sales Tax	Information not provided.
Shipping	Information not provided.
Transmitter de-install	Information not provided.
RF Accessories	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
Primary Antenna DeltastarTUG-05-16/80H-2-B	\$90,930.00	\$86,400.00		\$0.00	
UHF - High Power Top Mount Three Station broadband panel antenna horizontally polarized	<i>\$0.00</i>	\$0.00	Current antenna reused for post-transition channel. No changes required.	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Adding a module to existing combiner (without antenna)	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Auxiliary Antenna TFU-28DSC-RO4	\$274,057.00	\$245,235.00		\$0.00	
Sales Tax	<i>\$16,340.00</i>	\$16,340.00	estimated sales tax based on California and local sales tax rate 8.25%	N/A	N/A
UHF - Lower Power Side Mount, One	\$189,500.00	\$164,560.00	antenna cost per attached	N/A	N/A

station - 200-500 kW, horizontally polarized			Dielectric quote		
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Elbow complex, single channel, at antenna input, per 7 3 /16. feedline (if needed)	\$13,900.00	\$10,298.00	N/A	N/A	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$23,200.00	Side mount brackets per attached Dielectric quote	N/A	N/A
Shipping	\$24,437.00	\$24,437.00	Shipping per attached Dielectric quote.	N/A	N/A
Sub-total	\$364,987.00	\$331,635.00	N/A	\$0.00	N/A
Total for all systems	\$2,988,107.00	\$2,367,653.00	N/A	\$311,118.13	N/A

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
Primary Transmission Line	\$0.00	\$0.00		\$0.00	
Auxiliary Transmission Line	\$547,428.00	\$333,647.00		\$0.00	
Rigid Transmission Line - copper, 7 3 /16"	\$522,000.00	\$308,219.00	N/A	N/A	N/A
Sales Tax	<i>\$25,428.00</i>	\$25,428.00	sales tax based on California and local sales tax rate of 8.25%	N/A	N/A
Sub-total	\$547,428.00	\$333,647.00	N/A	\$0.00	N/A
Total for all systems	\$2,988,107.00	\$2,367,653.00	N/A	\$311,118.13	N/A

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
Primary Tower TOWER	\$649,100.00	\$417,000.00		\$0.00	
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	N/A	N/A
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	N/A	N/A
Major tower reinforcement /modifications	\$421,000.00	\$200,000.00	N/A	N/A	N/A
Tower Consulting	\$5,000.00	\$5,000.00	tower consulting - quote attached	N/A	N/A
Sub-total	\$649,100.00	\$417,000.00	N/A	\$0.00	N/A
Total for all systems	\$2,988,107.00	\$2,367,653.00	N/A	\$311,118.13	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
Outside Professional Services	\$140,295.00	\$121,369.00		\$0.00	
Transmitter Site Survey	<i>\$20,600.00</i>	\$20,600.00	Transmitter Site Survey. Quote with description attached.	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$4,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form	\$5,260.00	\$5,000.00	N/A	N/A	N/A

2100 (main),
Construction
Permit
Application

Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Project management of the transition	\$60,040.00	\$44,519.00	Per attached TI Digital quote	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Perform engineering	\$7,360.00	\$7,000.00	N/A	N/A	N/A

study for new
channel
assignment
and antenna
development

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Sub-total	\$140,295.00	\$121,369.00	N/A	\$0.00	N/A
Total for all systems	\$2,988,107.00	\$2,367,653.00	N/A	\$311,118.13	N/A

Components

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
Other Expenses	\$48,495.00	\$47,895.00		\$0.00	
Equipment Storage	<i>\$30,500.00</i>	\$30,500.00	Estimate for 1 year of antenna & line storage	N/A	N/A
MVPD Notification of Channel Change	<i>\$2,500.00</i>	\$2,500.00	Attorney assistance in coordinating MVPD notification	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$2,500.00</i>	\$2,500.00	Attorney review to ensure FCC compliance	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Sub-total	\$48,495.00	\$47,895.00	N/A	\$0.00	N/A
Total for all systems	\$2,988,107.00	\$2,367,653.00	N/A	\$311,118.13	N/A

Components

Information not provided.

Cost Information	Grand Total		
	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$2,988,107.00	\$2,367,653.00	\$311,118.13

Reimbursement Status	Question	Response
	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
	Submission of Estimated Expenses Statements	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>	
		<ol style="list-style-type: none"> 1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. 4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the 	

signal of a
broadcaster that
changes channels
(MVPD).

5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**Susan
Triana**
*Senior
Accounting
Manager,
Projects*

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.
8. The above-named entity acknowledges that overpayments or payments in error

	<p>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>Susan Triana <i>Senior Accounting Manager, Projects</i></p> <p>10/05/2017</p>

Attachments