



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **71928** | Service: **DTV** | Call **WNED-TV** | Channel: **31 (UHF)** |  
ID:  
File **0000028145**  
Number:  
FRN: **0003410461** | Date **12/13**  
Submitted: **/2017**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>WESTERN NY PUBLIC BROADCASTING ASSOC.</b> Doing Business As: WNED-TV	JOSEPH C. PUMA PO Box 1263 BUFFALO, NY 14240 United States	+1 (716) 845-7000	jpuma@wned.org	Not-for-Profit

## 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	Sweep line/antenna to asses performance on new channel, remove existing IOT main & backup transmitters & channel-specific indoor RF systems, replace w/solid-state transmitters and appropriate indoor RF systems, tune & optimize antenna/line on new channel

## Transmitters

Section	Question	Response
<b>Transmitter Related Expenses</b>	Do you have transmitter related expenses?	Yes

**Auxiliary  
Transmitter****Add Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	backup
	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	DCXP
	Year	2002
	Type	Inductive Output Tube
	IOT Power Type	Single
	Power Capacity	25 kW

**Auxiliary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
New Transmitter	Use	Auxiliary (Backup)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	ULXTE-10
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	6.6 kW
	Justification for New Transmitter	Retuning high-power IOT transmitter from ch.43 to 31 requires a new IOT, new circuit assemblies, "additional costs for sustaining engineering" and exceeds the cost of a properly sized solid- state transmitter. Please see retune quote and letter attached.

**Auxiliary  
Transmitter****Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	3 inches
	Length	40.0 feet
	Other Electrical Service	No
	Description	N/A
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	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

**Auxiliary  
Transmitter****Other Transmitter Cost Not Listed**

Information not provided.

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	DCXP
	Year	2002
	Type	Inductive Output Tube
	IOT Power Type	Single
	Power Capacity	25 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-10
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	6.6 kW
	Justification for New Transmitter	Retuning high-power IOT transmitter from ch.43 to 31 requires a new IOT, new circuit assemblies, "additional costs for sustaining engineering" and exceeds the cost of a properly sized solid- state transmitter. Please see retune quote and letter attached.

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	Yes
	Size	3 inches
	Length	40.0 feet
	Other Electrical Service	No
	Description	N/A
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	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
Coaxial switch controller	Controller for coaxial switch



<b>Coaxial switch</b>	Indoor 4-port 3-1/8" coax antenna line switch to switch between main & aux transmitters
<b>Control cable</b>	Control cable for switch to controller interconnection
<b>Dummy Load</b>	Indoor air-cooled broadband dummy load

**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	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	1
	Number of Panels	16
	Design power capacity in use	10.0 %
	Lower Limit	470.00 MHz

Upper Limit	806.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	123.0 kW
Manufacturer	Dielectric
Model	TUC-05-16 /80H-1
Year	2002

**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?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Name	Description
Test transition assembly	Broadband test assembly for initial transmission line & antenna sweep and post channel change sweep & tune, 6-1/8" to Type-N 50 ohm.

**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	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	Dielectric
	Type	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1100 feet per run

Primary  
Transmission Line

Other Transmission Line Expenses Not Listed

Name	Description
Un-Flanged indoor transmission line	3-1/8" un-flanged indoor transmission line
Un-Flanged indoor transmission line elbows	3-1/8" un-flanged indoor transmission line elbows
Adapter-transformer	6-1/8" 75 Ohm to 3-1/8" 50 Ohm transmission line adapter/transformer
Field Flanges	3-1/8" indoor field flanges
Flanged indoor transmission line	3-1/8" flanged indoor transmission line
Flanged indoor transmission line elbows	3-1/8" flanged indoor transmission line elbows
Hangers	3-1/8" line ceiling hangers
Reducer assembly	8-3/16" to 6-1/8" indoor transmission line reducer assembly

**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	Yes
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1033433
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	43° 01' 48.2" N-
	Longitude (NAD83)	078° 55' 14.1" W-
	Overall Structure Height	1133.84 feet
	Support Structure Height	1067.90 feet
	Ground Elevation Above Mean Sea Level (AMSL)	577.09 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	Western New York Public Broadcasting Association
	Date Constructed	01/01/1986

**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
71905	WNLO	DTV

#### Other Types of Users

Users
LPFM
Microwave relay

#### 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**

Name	Description
Rigging	Crew mobilization, winch, rig & unrig tower to facilitate transmission line and elbow complex retuning (Item #2 on Warmus & Associates quote attached).



**Outside  
Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	No
	Number of Hours	N/A
	Explanation	N/A
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development	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
	Quantity	N/A
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
<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	No
	Quantity	N/A
	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	No
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	Yes
	Number of Days	7

Justification	Disassemble & deconstruct old high-power, channel-specific RF systems & plumbing. Tune and optimize antenna, elbow complex & line sections. Post-transition sweep test of entire system following retuning. Issue report. See vendor quote items 3 & 4 attached
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**Outside Professional Services Costs**      **Other Professional Services Expenses Not Listed**  
If not provided.

## Other Expenses

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	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
<b>Permit and Filing Costs</b>	Local Zoning	No
	Non-zoning permits	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	No
	FCC Special Temporary Authority Application	No
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
	Does this relocation require Equipment Storage?	No
	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

<b>Other Expenses</b>	<b>Other Expenses Not Listed</b> 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
<b>Primary Transmitter ULXTE-10</b>	<b>\$259,096.98</b>	<b>\$257,726.98</b>		<b>\$0.00</b>	
Dummy Load	<i>\$12,322.77</i>	\$12,322.77	N/A	N/A	N/A
Coaxial switch	<i>\$4,900.95</i>	\$4,900.95	N/A	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$2,080.00	\$1,960.00	N/A	N/A	N/A
Transformer 3 phase/480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	N/A	N/A
Coaxial switch controller	<i>\$3,033.73</i>	\$3,033.73	N/A	N/A	N/A
Control cable	<i>\$253.44</i>	\$253.44	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 6.6 kW	<i>\$210,956.09</i>	\$210,956.09	N/A	N/A	N/A
<b>Auxiliary Transmitter ULXTE-10</b>	<b>\$213,036.09</b>	<b>\$212,916.09</b>		<b>\$0.00</b>	
UHF - Liquid Cooled Solid State Transmitter 6.6 kW	<i>\$210,956.09</i>	\$210,956.09	N/A	N/A	N/A

3" Rigid Conduit and Wiring (Cost per foot)	\$2,080.00	\$1,960.00	N/A	N/A	N/A
<b>Sub-total</b>	\$472,133.07	\$470,643.07	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$1,062,560.68	\$601,590.68	N/A	\$13,337.59	N/A

## Components

Information not provided.

Cost  
Information

Antennas

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna TUC-05-16/80H-1	\$257,457.92	\$10,127.92		\$6,071.07	
Test transition assembly	\$3,727.92	\$3,727.92	N/A	\$3,727.92	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$2,343.15	N/A
UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized	\$247,000.00	\$0.00	N/A	N/A	N/A
Sub-total	\$257,457.92	\$10,127.92	N/A	\$6,071.07	N/A
Total for all systems	\$1,062,560.68	\$601,590.68	N/A	\$13,337.59	N/A

Components

Actual Information	
Description	File Name
Test transition assembly	<div><div>Component Description:</div><div>Amount:</div><div>Test transition assembly, item #2 on invoice, includes 1/2 of total shipping cost \$3,727.92</div></div>



Sweep test of existing antenna	<div> <div>Component Description:</div> <div>Sweep test of existing antenna &amp; line</div> <div>Amount:</div> <div>\$2,343.15</div> </div>
UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized	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	\$21,544.69	\$21,544.69		\$2,933.52	
Reducer assembly	\$2,933.52	\$2,933.52	N/A	\$2,933.52	N/A
Flanged indoor transmission line elbows	\$4,253.71	\$4,253.71	N/A	N/A	N/A
Un-Flanged indoor transmission line	\$3,437.71	\$3,437.71	N/A	N/A	N/A
Un-Flanged indoor transmission line elbows	\$2,970.51	\$2,970.51	N/A	N/A	N/A
Adapter- transformer	\$2,607.31	\$2,607.31	N/A	N/A	N/A
Field Flanges	\$933.71	\$933.71	N/A	N/A	N/A
Hangers	\$1,245.71	\$1,245.71	N/A	N/A	N/A
Flanged indoor transmission line	\$3,162.51	\$3,162.51	N/A	N/A	N/A
Sub-total	\$21,544.69	\$21,544.69	N/A	\$2,933.52	N/A
Total for all systems	\$1,062,560.68	\$601,590.68	N/A	\$13,337.59	N/A

Components

Actual Information	
Description	File Name
Reducer assembly	<p><b>Component Description:</b> Reducer assembly, item #1 on invoice, includes 1/2 of total shipping cost</p> <p><b>Amount:</b> \$2,933.52</p>
Flanged indoor transmission line elbows	Information not provided.
Un-Flanged indoor transmission line	Information not provided.
Un-Flanged indoor transmission line elbows	Information not provided.
Adapter-transformer	Information not provided.
Field Flanges	Information not provided.
Hangers	Information not provided.
Flanged indoor transmission line	Information not provided.

Cost  
Information

Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower TOWER	\$231,600.00	\$21,100.00		\$0.00	
Rigging	<i>\$21,100.00</i>	\$21,100.00	N/A	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$0.00	N/A	N/A	N/A
Sub-total	\$231,600.00	\$21,100.00	N/A	\$0.00	N/A
Total for all systems	\$1,062,560.68	\$601,590.68	N/A	\$13,337.59	N/A

Components

Information not provided.

## Cost Information

### Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Outside Professional Services</b>	<b>\$59,275.00</b>	<b>\$58,175.00</b>		<b>\$4,333.00</b>	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$735.00	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$3,175.00	Included engineering study and calculation of transmission system losses on post repack channel in order to insure accuracy
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$423.00	N/A

Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	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
Additional Field Engineering Service, 7 Days	<b>\$36,925.00</b>	\$36,925.00	5 days, \$5275 /day f/5-man crew for disassembly & deconstruction of old high-power channel-specific RF systems & plumbing. 2 days, \$5275 /day f/5-man crew to tune & optimize antenna/line & conduct post-transition sweep. See vendor quote items 3 & 4 attached	N/A	N/A
<b>Sub-total</b>	<b>\$59,275.00</b>	<b>\$58,175.00</b>	<b>N/A</b>	<b>\$4,333.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$1,062,560.68</b>	<b>\$601,590.68</b>	<b>N/A</b>	<b>\$13,337.59</b>	<b>N/A</b>

## Components

**Actual Information**  
**Description**

**File Name**

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<p><b>Component Description:</b></p> <p>Review, preparation and filing of Construction Permit application. Reflects items 1-3 on invoice.</p> <p><b>Amount:</b></p> <p>\$735.00</p>
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<p><b>Component Description:</b></p> <p>Engineering study /evaluation and preparation of Construction Permit Application - engineering section</p> <p><b>Amount:</b></p> <p>\$3,175.00</p>
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Prepare and or review reimbursement form	<p><b>Component Description:</b></p> <p>Review and file FCC form 399. Reflects items 4 &amp; 5 on invoice</p> <p><b>Amount:</b></p> <p>\$423.00</p>
Perform engineering study for new channel assignment and antenna development	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.
Additional Field Engineering Service, 7 Days	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	\$20,550.00	\$20,000.00		\$0.00	
MVPD Notification of Channel Change	\$1,500.00	\$1,500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$2,500.00	\$2,500.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Sub-total	\$20,550.00	\$20,000.00	N/A	\$0.00	N/A
Total for all systems	\$1,062,560.68	\$601,590.68	N/A	\$13,337.59	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>	\$1,062,560.68	\$601,590.68
			\$13,337.59

<b>Reimbursement Status</b>	<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
	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>Joseph Charles Puma</b>  <i>Vice President Engineering and Technology</i></p> <p>12/13/2017</p>

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).	
		<ol style="list-style-type: none"> <li>1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	

4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD) .
6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Joseph Charles Puma</b>  <i>Vice President - Engineering and Technology</i></p> <p>12/13/2017</p>

## Attachments