



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **55083** | Service: **DTV** | Call **KXLA** | Channel: **51 (UHF)**  
ID: | Sign:  
File **0000027093**  
Number:  
FRN: **0007519408** | Date **01/31**  
Submitted: **/2018**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>RANCHO PALOS VERDES BROADCASTERS, INC.</b>	Ronald L. Ulloa 2323 CORINTH AVENUE LOS ANGELES, CA 90064 United States	+1 (310) 478-0055	rulloa@kxla.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>Greg Best</b> <i>Consulting Engineer</i> <i>Greg Best Consulting, Inc.</i>	16100 Outlook Ave. Stilwell, KS 66085 United States	+1 (816) 792-2913	gbconsulting54@gmail.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	File Interim STA. Replace interim backup antenna, transmitter & line. Install and sweep primary T-Line & antenna. Remove & replace primary transmitter .

**Transmitters**

Section	Question	Response
<b>Transmitter Related Expenses</b>	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)
	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	Innovator
	Year	2006
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	60 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	Paragon
	Transmitter Type	Inductive Output Tube
	IOT Power Type	Two
	Power capacity	50 kW
	Justification for New Transmitter	Existing transmitter manufacturer is no longer in business and it is not possible to retune the existing transmitter to the repacked channel.

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes

	Size	3 inches
	Length	200.0 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**  
Information not provided.

**Interim  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase
	Manufacturer	
	Model	Paragon
	Transmitter Type	Inductive Output Tube
	IOT Power Type	Two
	Power capacity	50 kW
	Justification for New Transmitter	Existing backup transmitter cannot be converted to repacked channel per manufacturer and manufacturer is no longer in business.

**Interim  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	3 inches

	Length	200.0 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
<b>Inside RF System</b>	Is an additional interior RF system required to support this interim transmitter?	No

**Interim 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)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	Yes
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
<b>Existing Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	4
	Number of Panels	30
	Design power capacity in use	90.0 %
	Lower Limit	578.00 MHz
	Upper Limit	700.00 MHz
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	1000.0 kW

Manufacturer	
Model	PHP30CA-CH51
Year	2006

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

Facility ID	Call Sign
24518	KDOC-TV
14000	KJLA
4328	KOCE-TV

**Primary  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
<b>New Antenna Manufacturer and Types</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	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) .....	670.0 kW
	Manufacturer	
	Model	ATW24H3- ESC170
	Year	2018

Justification for New Antenna	Existing antenna is not designed to operate on repacked channel. Quote will be obtained for Hpol and elliptically polarized antenna to identify the cost differential and clarify the reimbursement requested.
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**Primary Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Combiner for Shared Antenna</b>	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
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	6 1/8 inches inches
<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.

**Interim  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	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)	670.0 kW
	Manufacturer	
	Model	ATW24H3-ESC170
Year	2018	

Justification for New Antenna	Existing antenna cannot be converted to repacked channel per manufacturer. Quote will be obtained that identifies Hpol and elliptically polarized antenna cost differential to clarify the reimbursement requested.
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**Interim Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	S
	Feed Line Size	6 1/8 inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for an 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

**Interim 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)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	Yes
	Is Transmission Line in operating condition?	Yes
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Flexible Air
	Diameter	5 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	4
	Length	410 feet per run

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

Facility ID	Call Sign
14000	KJLA
24518	KDOC-TV
4328	KOCE-tv



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

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	450 feet per run
	Justification for New Transmission Line	See attached document on station transmission line systems and justification for new equipment purchase.

**Primary  
Transmission  
Line**      **Other Transmission Line Expenses Not Listed**

Information not provided.

**Interim  
Transmission  
Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Rigid
	Diameter	6 1/8 inches
	Segment Length	Broadband
	Other Segment Length	
	Number of parallel runs	1
	Length	330 feet per run
	Justification for New Transmission Line	See attached T-Line system description documentation regarding existing transmission line system and justification for purchase.

**Interim  
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
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	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	1221073
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	34° 13' 35.3" N-
	Longitude (NAD83)	118° 04' 00.9" W-
	Overall Structure Height	403.87 feet
	Support Structure Height	399.93 feet
	Ground Elevation Above Mean Sea Level (AMSL)	5709.90 feet

Structure Type	LTOWER - Lattice Tower
Tower Owner	American Towers, LLC.
Date Constructed	07/15/2001

**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
1234	KACV-FM	FM

**Primary  
Tower**

**Tower Modification Costs**

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

**Primary  
Tower**

**Tower Rigging Costs**

Section	Question	Response
<b>Tower Rigging Costs</b>	Complex Tower	N/A
<b>Helicopter Services Required</b>	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	160
	Explanation	Coordination with vendors, other stations, and logistics due to site conditions.
<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	Yes
	Quantity	1
	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	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
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

**Other Professional Services Expenses Not Listed**

**Outside Professional Services Costs** Information 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	Yes
	Non-zoning permits	No
	BLM or NFS Coordination	Yes
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
<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?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	No
	Does this relocation require MVPD Notification of a Channel Change?	Yes

**Other  
Expenses**

**Other Expenses Not Listed**

Name	Description
<b>Sales or Use tax</b>	Sales/use tax for purchases. KXLA receives a special rate of 3.75%.

**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>Interim Transmitter Paragon</b>	<b>\$1,002,600.00</b>	<b>\$1,434,570.00</b>		<b>\$0.00</b>	
Two IOT system (50 kW)	\$954,000.00	\$1,388,470.00	See attached quote for 2 IOT transmitter system. This replaces "like for like" and meets TPO required.	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$10,400.00	\$9,800.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
<b>Primary Transmitter Paragon</b>	<b>\$1,002,600.00</b>	<b>\$1,434,570.00</b>		<b>\$0.00</b>	
Two IOT system (50 kW)	\$954,000.00	\$1,388,470.00	See attached quote for 2 IOT transmitter system.	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A

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3" Rigid Conduit and Wiring (Cost per foot)	\$10,400.00	\$9,800.00	N/A	N/A	N/A
<b>Sub-total</b>	\$2,005,200.00	\$2,869,140.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$3,384,974.00	\$4,214,849.00	N/A	\$0.00	N/A

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### **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>Interim Antenna ATW24H3-ESC170</b>	<b>\$282,440.00</b>	<b>\$280,100.00</b>		<b>\$0.00</b>	
Pattern scatter analysis for side mount high /med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$22,000.00	N/A	N/A	N/A

UHF - High Power, Side Mount, basic slot antenna, 670 kW input, directional,, elliptically or circularly polarized	<b><i>\$235,000.00</i></b>	\$235,000.00	Quote for antenna is provided to demonstrate the cost deduction for the Hpol antenna version if that route is chosen. Both Epol and Hpol version of antenna is below the catalog price for this power level antenna.	N/A	N/A
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 6 1/8. feedline (if needed)	\$12,300.00	\$11,700.00	N/A	N/A	N/A
<b>Primary Antenna ATW24H3-ESC170</b>	<b>\$282,440.00</b>	<b>\$280,100.00</b>		<b>\$0.00</b>	
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$11,700.00	N/A	N/A	N/A

UHF - High Power, Side Mount, basic slot antenna, 670 kW input, directional,, elliptically or circularly polarized	<b>\$235,000.00</b>	\$235,000.00	Quote for antenna is provided to demonstrate the cost deduction for the Hpol antenna version if that route is chosen. Both Epol and Hpol version of antenna is below the catalog price for this power level antenna.	N/A	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$22,000.00	N/A	N/A	N/A
Pattern scatter analysis for side mount high /med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$564,880.00</b>	<b>\$560,200.00</b>	N/A	\$0.00	N/A
<b>Total for all systems</b>	<b>\$3,384,974.00</b>	<b>\$4,214,849.00</b>	N/A	\$0.00	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
<b>Interim Transmission Line</b>	<b>\$76,560.00</b>	<b>\$72,930.00</b>		<b>\$0.00</b>	
Rigid Transmission Line - copper, 6 1/8" broadband	\$76,560.00	\$72,930.00	N/A	N/A	N/A
<b>Primary Transmission Line</b>	<b>\$104,400.00</b>	<b>\$99,450.00</b>		<b>\$0.00</b>	
Rigid Transmission Line - copper, 6 1/8" broadband	\$104,400.00	\$99,450.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$180,960.00</b>	<b>\$172,380.00</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$3,384,974.00</b>	<b>\$4,214,849.00</b>	N/A	<b>\$0.00</b>	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
<b>Primary Tower LTOWER</b>	<b>\$254,800.00</b>	<b>\$242,000.00</b>		<b>\$0.00</b>	
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	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
Short Tower (less than 500')	\$84,200.00	\$80,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$254,800.00</b>	<b>\$242,000.00</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$3,384,974.00</b>	<b>\$4,214,849.00</b>	N/A	<b>\$0.00</b>	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>\$140,190.00</b>	<b>\$132,750.00</b>		<b>\$0.00</b>	
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	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 - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$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
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$25,280.00	\$24,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$140,190.00	\$132,750.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$3,384,974.00	\$4,214,849.00	N/A	\$0.00	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
<b>Other Expenses</b>	<b>\$238,944.00</b>	<b>\$238,379.00</b>		<b>\$0.00</b>	
Sales or Use tax	<i>\$174,864.00</i>	\$174,864.00	N/A	N/A	N/A
MVPD Notification of Channel Change	<i>\$3,500.00</i>	\$3,500.00	N/A	N/A	N/A
Equipment Storage	<i>\$1,500.00</i>	\$1,500.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$40,000.00</i>	\$40,000.00	N/A	N/A	N/A
BLM or NFS Coordination	<i>\$5,000.00</i>	\$5,000.00	N/A	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 - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
Local Zoning	<i>\$2,000.00</i>	\$2,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$238,944.00</b>	<b>\$238,379.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$3,384,974.00</b>	<b>\$4,214,849.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>

## **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>	\$3,384,974.00	\$4,214,849.00	\$0.00

**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.



<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>Ron Ulloa</b> <i>President</i>  01/31/2018</p>

**Attachments**