



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **53517** | Service: **DTV** | Call **WXXV-TV** | Channel: **25 (UHF)** |
ID: | Sign:
File **0000028247**
Number:
FRN: **0003766417** | Date **04/03**
Submitted: **/2018**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
MORRIS NETWORK OF MISSISSIPPI, INC. Doing Business As: MORRIS NETWORK OF MISSISSIPPI, INC.	Bobby Berry 301 Poplar Street MACON, GA 31201 United States	+1 (478) 745-4141	bberry@morrisnetwork.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
Ray Luke <i>Project Manager</i> <i>Custom Specialty Services, LLC</i>	Ray Luke 17363 Carlton Cuebas Road Gulfport, MS 39503 United States	+1 (228) 297-2500	ray.css@att.net

**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	WXXV-TV plans to replace its existing antenna,line and transmitter with new ones that will accommodate its new channel. in the interim it will connect its existing transmitter to a interim antenna that will have been used in phase 1 at WCBI-TV.

Transmitters

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

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

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	use as backup for main when main transmitter is down for repairs or maintance
	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	ranger 1000
	Year	2000
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	1.2 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?	No
	Manufacturer	
	Model	UAXTE- 2R37
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1.2 kW
	Justification for New Transmitter	Old transmitter will not re- tune to new channel

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

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	1 inches
	Length	200.0 feet
	Other Electrical Service	No
	Description	N/A

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

Auxiliary Transmitter **Other Transmitter Cost Not Listed**
Information not provided.

**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	TC121iD
	Year	2006
	Type	Inductive Output Tube
	IOT Power Type	Single
	Power Capacity	12 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	UAXTE- 12R44
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	10 kW
	Justification for New Transmitter	The old transmitter is no longer supported and therefore cannot be re-tuned. While the Form 399 FAQ's instruct to list this as an upgrade, it actually is not, but rather a simple replacement. See attachment.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	Yes

	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	Yes
	Size	3 inches
	Length	175.0 feet
	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Type	Cooling Only
	Size	10 tons
	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
psip generator	PSIP generator need for new transmitter
site survey	site survey by Gates/Air for floor plan and electrical drawing of transmitter site

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	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?	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?	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)	300.0 kW

Manufacturer	
Model	TFU-31JSC T180
Year	2006

Primary
Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	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)	190.0 kW
	Manufacturer	

Model	SWCDS28TL /25
Year	2018
Justification for New Antenna	Old antenna will not re- tune to new channel

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	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	4 1/16 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?	Yes
Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary
Antenna**

Other Antenna Cost Not Listed
Information not provided.

Transmission Line

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

Primary
Transmission Line

Existing Transmission Line

Section	Question	Response
Existing Transmission Line Description	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?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	Rigid
	Diameter	4 1/16 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1550 feet per run

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

	Question	Response
New Transmission Line Costs	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	4 1/16 inches
	Other Diameter	N/A
	Segment Length	19 1/2 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1550 feet per run
	Justification for New Transmission Line	Old line wrong segment length for new channel.

Primary **Other Transmission Line Expenses Not Listed**
Transmission Line **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	Owned
	Is this tower consider Complex?	Terrain Constrained
	Is this tower currently shared with any other stations?	No
	One or more FM, AM or TV radio broadcaster(s)	N/A
	Others Types of Users	N/A
	Is tower documented for structural analysis?	No
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1059698
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	30° 44' 49.0" N-
	Longitude (NAD83)	089° 03' 30.0" W-
	Overall Structure Height	1540.01 feet
	Support Structure Height	1478.00 feet

Ground Elevation Above Mean Sea Level (AMSL)	240.15 feet
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	MORRIS NETWORK OF MISSISSIPPI, INC.
Date Constructed	12/15/1986

Primary Tower

Tower Modification Costs

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

Primary Tower

Tower Rigging Costs

Section	Question	Response
Tower Rigging Costs	Complex Tower	Terrain constrained
Helicopter Services Required	Are helicopter services required?	No

**Primary
Tower**

Other Tower Expenses Not Listed
Information not provided.

**Outside
Professional Services Costs**

Section	Question	Response
Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	2200
	Explanation	Station is one of a group of co-owned stations, all of which are subject to repack. there is no group director of engineering and station has only IT engineer on staff. co-ordination is needed for the entire group's transition in different phases
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	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
Attorney and Other Outside Consulting Services	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	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	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
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	No

Number of Days	N/A
Justification	N/A

Outside

Professional

Other Professional Services Expenses Not Listed

Services Costs

Name

Description

Additional legal fees

Additional legal fees for 399 forms and progress reports

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	Yes
	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	Yes
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	No
	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.

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-12R44	\$494,700.00	\$471,925.00		\$88,558.96	
site survey	<i>\$17,200.00</i>	\$17,200.00	N/A	N/A	N/A
psip generator	<i>\$14,850.00</i>	\$14,850.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 10 - 12 kW	\$336,500.00	\$320,000.00	N/A	\$88,558.96	N/A
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$13,700.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$9,100.00	\$8,575.00	N/A	N/A	N/A
10 Ton system	\$38,900.00	\$37,000.00	N/A	N/A	N/A

Auxiliary Transmitter UAXTE-2R37	\$130,500.00	\$124,500.00		\$24,850.26	
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$120,000.00	N/A	\$24,850.26	N/A
1" Rigid Conduit and Wiring	\$4,500.00	\$4,500.00	N/A	N/A	N/A
Sub-total	\$625,200.00	\$596,425.00	N/A	\$113,409.22	N/A
Total for all systems	\$3,013,140.00	\$2,835,760.00	N/A	\$164,244.21	N/A

Components

Actual Information	
Description	File Name
site survey	Information not provided.
psip generator	Information not provided.

UHF - Air Cooled Solid State Transmitter 10 - 12 kW	Component Description: Amount:	Gates quote # Q-59830 N/A
	Component Description: Amount:	Transmitter Justification letter N/A
	Component Description: Amount:	1/3 down payment on main xmitter \$88,558.96
	Component Description: Amount:	1/3 downpayment due for main transmitter. \$88,558.96
Service entrance 3 phase /800 amp/208 volt	Information not provided.	
Switchgear - industrial 800 amp	Information not provided.	
Transformer 3 phase/480v - 150 KVA	Information not provided.	
3" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
10 Ton system	Information not provided.	

UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	<table> <tr> <td data-bbox="707 174 1013 208">Component Description:</td><td data-bbox="1147 174 1337 322">1/3 DOWN PAYMENT BACKUP TRANSMITTER</td></tr> <tr> <td data-bbox="707 338 815 365">Amount:</td><td data-bbox="1147 338 1278 365">\$24,850.26</td></tr> <tr> <td data-bbox="707 477 1013 510">Component Description:</td><td data-bbox="1147 477 1350 544">Gates quote # Q- 59831</td></tr> <tr> <td data-bbox="707 560 815 586">Amount:</td><td data-bbox="1147 560 1193 586">N/A</td></tr> <tr> <td data-bbox="707 698 1013 732">Component Description:</td><td data-bbox="1147 698 1356 801">1/3 downpayment for auxiliary transmitter</td></tr> <tr> <td data-bbox="707 817 815 844">Amount:</td><td data-bbox="1147 817 1278 844">\$24,850.26</td></tr> <tr> <td data-bbox="707 956 1013 990">Component Description:</td><td data-bbox="1147 956 1362 1023">1/3 down payment on backup xmitter</td></tr> <tr> <td data-bbox="707 1039 815 1066">Amount:</td><td data-bbox="1147 1039 1278 1066">\$24,850.26</td></tr> </table>	Component Description:	1/3 DOWN PAYMENT BACKUP TRANSMITTER	Amount:	\$24,850.26	Component Description:	Gates quote # Q- 59831	Amount:	N/A	Component Description:	1/3 downpayment for auxiliary transmitter	Amount:	\$24,850.26	Component Description:	1/3 down payment on backup xmitter	Amount:	\$24,850.26
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Amount:	\$24,850.26																
1" Rigid Conduit and Wiring	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 SWCDS28TL /25	\$134,110.00	\$127,500.00		\$0.00	
UHF - Lower Power Side Mount, One station antenna - medium power (50- 200 kW), horizontally polarized	\$89,400.00	\$85,000.00	N/A	N/A	N/A
Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	\$9,570.00	\$9,100.00	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

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
Sub-total	\$134,110.00	\$127,500.00	N/A	\$0.00	N/A
Total for all systems	\$3,013,140.00	\$2,835,760.00	N/A	\$164,244.21	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	\$220,100.00	\$209,250.00		\$0.00	
Rigid Transmission Line - copper, 4 1 /16"	\$220,100.00	\$209,250.00	N/A	N/A	N/A
Sub-total	\$220,100.00	\$209,250.00	N/A	\$0.00	N/A
Total for all systems	\$3,013,140.00	\$2,835,760.00	N/A	\$164,244.21	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	\$1,499,300.00	\$1,425,000.00		\$6,420.00	
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$25,000.00	N/A	\$6,420.00	N/A
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$400,000.00	N/A	N/A	N/A
Serious tower reinforcement /modifications	\$1,052,000.00	\$1,000,000.00	N/A	N/A	N/A
Sub-total	\$1,499,300.00	\$1,425,000.00	N/A	\$6,420.00	N/A
Total for all systems	\$3,013,140.00	\$2,835,760.00	N/A	\$164,244.21	N/A

Components

Actual Information	
Description	File Name

<p>Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study</p>	<table> <tr> <td data-bbox="726 174 1141 210">Component Description:</td><td data-bbox="1141 174 1428 210">TCI Proposal</td></tr> <tr> <td data-bbox="726 210 1141 246"></td><td data-bbox="1141 210 1428 246">TCI-17-023</td></tr> <tr> <td data-bbox="726 246 1141 282">Amount:</td><td data-bbox="1141 246 1428 282">N/A</td></tr> <tr> <td data-bbox="726 394 1141 430">Component Description:</td><td data-bbox="1141 394 1428 430">TCI W9 FORM</td></tr> <tr> <td data-bbox="726 430 1141 465"></td><td data-bbox="1141 430 1428 465">N/A</td></tr> <tr> <td data-bbox="726 577 1141 613">Component Description:</td><td data-bbox="1141 577 1428 613">Tower analysis</td></tr> <tr> <td data-bbox="726 613 1141 649"></td><td data-bbox="1141 613 1428 649">invoice</td></tr> <tr> <td data-bbox="726 649 1141 685">Amount:</td><td data-bbox="1141 649 1428 685">\$6,420.00</td></tr> <tr> <td data-bbox="726 797 1141 833">Component Description:</td><td data-bbox="1141 797 1428 833">tower analysis</td></tr> <tr> <td data-bbox="726 833 1141 869"></td><td data-bbox="1141 833 1428 869">invoice</td></tr> <tr> <td data-bbox="726 869 1141 904">Amount:</td><td data-bbox="1141 869 1428 904">\$6,420.00</td></tr> </table>	Component Description:	TCI Proposal		TCI-17-023	Amount:	N/A	Component Description:	TCI W9 FORM		N/A	Component Description:	Tower analysis		invoice	Amount:	\$6,420.00	Component Description:	tower analysis		invoice	Amount:	\$6,420.00
Component Description:	TCI Proposal																						
	TCI-17-023																						
Amount:	N/A																						
Component Description:	TCI W9 FORM																						
	N/A																						
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Component Description:	tower analysis																						
	invoice																						
Amount:	\$6,420.00																						
<p>Complex Tower (includes, for example, those with candelabras and/or stacked antennas)</p>	<p>Information not provided.</p>																						
<p>Serious tower reinforcement /modifications</p>	<p>Information not provided.</p>																						

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	\$493,640.00	\$437,400.00		\$44,414.99	
Additional legal fees	<i>\$8,500.00</i>	\$8,500.00	N/A	\$112.50	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	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	\$675.00	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
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	\$1,589.99	N/A
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$50,000.00	N/A	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A

Project management of the transition	\$347,600.00	\$328,650.00	N/A	\$42,037.50	N/A
Sub-total	\$493,640.00	\$437,400.00	N/A	\$44,414.99	N/A
Total for all systems	\$3,013,140.00	\$2,835,760.00	N/A	\$164,244.21	N/A

Components

Actual Information Description	File Name
Additional legal fees	<p>Component Description: Legal advice and assistance in connection with quarterly repack transition report required by FCC.</p> <p>Amount: \$112.50</p>
ASR modification (prepare FCC Form 854)	Information not provided.
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.

<p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="697 100 1098 405"> <p>Component Description:</p> <p>Amount:</p> </td><td data-bbox="1098 100 1428 405"> <p>Assist in preparation and filing of Form 2100 c.p. application \$450.00</p> </td></tr> <tr> <td data-bbox="697 405 1098 710"> <p>Component Description:</p> <p>Amount:</p> </td><td data-bbox="1098 405 1428 710"> <p>Drafted legal portion of Form 2100 c.p. application \$112.50</p> </td></tr> <tr> <td data-bbox="697 710 1098 1099"> <p>Component Description:</p> <p>Amount:</p> </td><td data-bbox="1098 710 1428 1099"> <p>Provided legal advice as to methods, contents, and filing requirements for Form 2100 \$112.50</p> </td></tr> </table>	<p>Component Description:</p> <p>Amount:</p>	<p>Assist in preparation and filing of Form 2100 c.p. application \$450.00</p>	<p>Component Description:</p> <p>Amount:</p>	<p>Drafted legal portion of Form 2100 c.p. application \$112.50</p>	<p>Component Description:</p> <p>Amount:</p>	<p>Provided legal advice as to methods, contents, and filing requirements for Form 2100 \$112.50</p>
<p>Component Description:</p> <p>Amount:</p>	<p>Assist in preparation and filing of Form 2100 c.p. application \$450.00</p>						
<p>Component Description:</p> <p>Amount:</p>	<p>Drafted legal portion of Form 2100 c.p. application \$112.50</p>						
<p>Component Description:</p> <p>Amount:</p>	<p>Provided legal advice as to methods, contents, and filing requirements for Form 2100 \$112.50</p>						
<p>Prepare request for Special Temporary Authorization</p>	<p>Information not provided.</p>						
<p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>						
<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<p>Information not provided.</p>						
<p>Perform engineering study for new channel assignment and antenna development</p>	<p>Information not provided.</p>						
<p>Prepare and or review reimbursement form</p>							

Component Description:	Provided information and legal advice concerning preparation of Schedule 399 estimate for reimbursement
Amount:	\$112.50

Component Description:	Provided legal advice and assistance with regard to reimbursement amounts, policies, and procedures - remaining \$112.50 reimbursement to be requested under separate line item for FCC-required progress reports once established.
Amount:	\$315.00

Component Description:	Preparation and transmittal of Form 1876 to enable reimbursement plus costs of transmission to FCC charged to client
Amount:	\$464.99

Component Description:	Assist in preparation and filing of Schedule 399
Amount:	\$540.00

	<p>Component Description:</p> <p>Provided bank account and other information required to enable reimbursement payments</p> <p>Amount:</p> <p>\$157.50</p>
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.
Comprehensive coverage verification via field study, if needed	Information not provided.
RF Exposure Measurements	Information not provided.

Project management of the transition

Component Description: CSS JAN 2018
invoice for Project
Management hours
Amount: \$24,787.50

Component Description: CSS NOV 2017
invoice for Project
Management hours
Amount: \$4,012.50

Component Description: FEB INVOICE FOR
PROJECT
MANAGEMENT
HOURS
Amount: \$4,162.50

Component Description: CSS OCT 2017
invoice for Project
Management hours
Amount: \$4,312.50

Component Description: CSS DEC 2017
invoice for Project
Management hours
Amount: \$4,762.50

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	\$40,790.00	\$40,185.00		\$0.00	
MVPD Notification of Channel Change	<i>\$300.00</i>	\$300.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$300.00</i>	\$300.00	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
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>\$0.00</i>	\$0.00	N/A	N/A	N/A

Disposal Costs (for equipment and other waste, net of any salvage value)	\$8,000.00	\$8,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$19,000.00	\$19,000.00	N/A	N/A	N/A
Sub-total	\$40,790.00	\$40,185.00	N/A	\$0.00	N/A
Total for all systems	\$3,013,140.00	\$2,835,760.00	N/A	\$164,244.21	N/A

Components

Information not provided.

Cost Information	Grand Total		
	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$3,013,140.00	\$2,835,760.00	\$164,244.21

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.

<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>Bobby Berry <i>Chief Operating Officer</i></p> <p>04/03/2018</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"> 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.

<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>Bobby Berry <i>Chief Operating Officer</i></p> <p>04/03/2018</p>

Attachments