

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility	18819	Service: DTV	Call	WLAE-TV	Channel: 23 (UHF)
iD: File	000002	27988	Sign:		
Number:	000001				
FRN: 00	01718832	Date	04/10		
		Submitted:	/2018		

Applicant Name, Type, and Contact Information

Information Applicant Applicant Address Phone Email Туре **EDUCATIONAL** 3900 Howard +1 (504) dave@wlae. Not-for-BROADCASTING Ave. 234-8989 Profit com FOUNDATION, INC. New Orleans, LA 70125 **United States**

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer	Preparer Contact Name and Information			
Contact Information	Applicant	Address	Phone	Email
	Charles L. Spencer Attorney Hebert, Spencer & Fry, L. L.P.	701 Laurel Street Baton Rouge, LA 70802 United States	+1 (225) 344- 2601	CLSAtty@gmail. com

Broadcaster	Question	Response
Information and Transition Plan	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.	Νο
	Briefly describe transition plan	WLAE-TV will transition from DT Channel 31 to DT Channel 23 as part of Transition Phase 7 with a Testing Period Start Date of 10/19/2019 and a Phase Completion Date of 1/17/2020. Testing will be coordinated with linked Station KNOV-CD (FIN 64048).

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

Primary	Existing Transmitter Infor	ter Information		
Transmitter	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		
	Manufacturer and Type	Model	HU15000AD	
		Year	2009	
		Туре	Solid State	
		Solid State Cooling	Air Cooled	
		Solid State Power Capacity	15 kW	

Primary	New Transmitter Costs		
Transmitter	Section	Question	Response
	New Transmitter	Use	Primary (Main)
		Change Type	Purchase New
		Is this a request for upgraded equipment?	No
		Manufacturer	
		Model	CTX718
		Transmitter Type	Solid State
		Solid State Cooling	Liquid Cooled
		Solid State Power capacity	15.0 kW
		Justification for New Transmitter	The existing transmitter output mask filter is channel specific and must be replaced to accommodate the new repack channel (see attachments pertaining to mask filter).

Primary	Other Transmitter Costs				
Transmitter	Section	Question	Response		
Tansmitter	Electrical Service	Service Entrance (3 phases 800A 208V)	No		
		Switchgear (industrial 800 amp)	No		
		Transformer (480V)	No		
		Power	N/A		
		Rigid Conduit and Wiring	No		

	Size	N/A
	Length	N/A
	Other Electrical Service	Yes
	Description	Upgrade the existing 400 amp service to a 600 amp service and add a 400 amp switch fused at 225 amps to power the new transmitter. The quote includes rigid conduit and wiring.
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Туре	Cooling Only
	Size	5 tons
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold 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 Mame

Name	Description
Electrical installation for HVAC	HVAC needs electrical installation for unit to operate.
Storage and Delivery	Heavy lift equipment rental.
Heat Exchanger Platform	A platform must be built to accommodate the transmitter's heat exchanger which will be located on the outside of the transmitter building.
Equipment and Labor for moving transmitter	The transmitter vendor requires that we provide personnel and equipment to help move the transmitter rack as well as heat exchanger and mask filter from the delivery truck into our transmitter facility.

Antennas Section		Question	Response
Antenna Rela	ated Expenses	Do you have antenna related expenses?	Yes

Primary	Existing Antenna Information				
Antenna	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?	Yes			
		Is antenna in operating condition?	Yes		
		Is antenna located on or in close proximity to an antenna farm?	No		
	Existing Antenna	Class	Full Power		
	Manufacturer and Type	Mounting	Side Mount		
		Antenna position in stack	Not in Stack		
		Polarization	Horizontal		
		Туре	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)	200.0 kW		

Manufacturer	
Model	TLP-16M
Year	2005

Antenna	Section	Question	Response
	New Antenna	Use	Primary (Main
	Description	Description of Use	N/A
		Change Type	Purchase Nev
		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?	No
	New Antenna	Class	Full Power
	Manufacturer and Type	es Mounting	Side Mount
		Antenna position in stack	Not in Stack
		Polarization	Elliptical
		Туре	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)	168.0 kW
		Manufacturer	
		Model	ATC- BCE12C2-23

Year	2018
Justification for New Antenna	The present
	antenna will
	be lowered
	on tower to
	accommodate
	space for new
	antenna.
	Station
	wishes to
	operate at full
	licensed
	power on Ch.
	31 while new
	re-pack
	antenna is
	mounted on
	tower. See
	attachment
	for WLAE
	repack plan.

Other Antenna Costs Primary

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Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
	Туре	
	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

Other Antenna Cost Not Listed

Primary Antenna

Name	Description
Shipping and Handling	Manufacturer delivery.
Storage	Storage for antenna before delivery to site for tower crew to mount on tower.

Transmissior	n Seffien	Question	Response
	Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

ransmissio	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	Manufacturer	
	Line Manufacturer and Type	Туре	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	950 feet per run

Primary Existing Transmission Line

Primary Transmissio	New Transmission Line				
	Section	Question	Response		
New Transmission Lin Costs	New Transmission Line Costs	Use	Primary (Main)		
		Description of Use	N/A		
		Change Type	Purchase New		
		Is this a request for upgraded equipment?	No		
		Туре	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	950 feet per run		

Justification for New Transmission Line	WLAE-TV
	wishes to
	continue
	broadcasting
	at full
	licensed
	power on
	our present
	channel
	using the
	existing
	transmissior
	line while
	new
	transmission
	line is
	installed for
	new channe
	assignment.
	See
	attachment
	for WLAE
	repack plan

Primary	Other Transmission Line Expenses Not Listed		
Transmissi	on Line		Description

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

Primary	Existing Tower
Tower	Section

ower	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?	No
	Existing Tower Structure	Do you have a tower registration number?	Yes
	Registration	ASR Number	1000007
	Coordinates (<u>NAD83</u> (North American Datum of 1983))	Latitude (NAD83)	29° 58' 58.0" N-
		Longitude (NAD83)	089° 57' 09.0" W-
		Overall Structure Height	1049.86 feet
		Support Structure Height	1049.86 feet
		Ground Elevation Above Mean Sea Level (AMSL)	0.00 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	BAYOU BIENVENUE TOWER
	Date Constructed	05/01/1984

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
58394	WNOE-FM	FM
52435	WWL-FM	FM
54890	WRNO-FM	FM

Primary Tower Modification Costs

Tower

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:	Major Reinforcements needed

Primary Tower Rigging Costs

Tower	Section	Question	Response
	Tower Rigging Costs	Complex Tower	N/A

Helicopter Services
Required

Primary Tower	Other Tower Expenses Not Listed		
	Name	Description	
	Tower Rigging	Tower rigging is needed to reinforce and modify existing G-7 guy wired tower structure	
	Structural Analysis	A structural analysis is needed for the conditions used to add the new repack antenna and transmission line. See WLAE-TV repack plan in attachments.	

Outside Professional	Section	Question	Response
	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	500
		Explanation	WLAE-TV will need outside assistance and project management due to insufficient staffing levels to support a major project.
	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	2
		Do you have Distributed Transmission System engineering services?	N/A
		Critical Facility	N/A
		Terrain-Shielded Facility	N/A
-	Attorney and Other Outside Consulting	Prepare and file Form FCC Construction Permit Application	Yes
	Services	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	2
	NEPA Section 106 environmental review	No
	Environmental Assessment	Yes
	ASR Modification	No
	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	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	Yes
	Number of Days	22

Other Professional Services Expenses Not Listed Professional Services roostsided.

Other	Section	Question	Response
Expenses	AM Pattern Disturbance	Is an Impact Study needed?	No
		Is Remediation needed?	No
	Facility Expenses	Name	N/A
		Other Distributed Transmission System Expenses Not listed	N/A
		Name	N/A
		Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
	Permit and Filing Costs	Local Zoning	No
		Non-zoning permits	No
		BLM or NFS Coordination	No
		FCC Construction Permit Minor Change	Yes
		FCC License to Cover Application	Yes
		FCC Special Temporary Authority Application	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?	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

Other Expenses Not Listed

Other	Other Expenses Not Listed		
Expenses	Name	Description	
	In-House Labor Reimbursement Costs	Reimbursement for the cost of the salary of an internal employee for the time he or she works exclusively on tasks directly related to the station's channel change.	
	Bathroom Facilities	Temporary bathroom facilities are needed for crews working on repack project on the BBT tower.	

Transmitters

Cost Information

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 CTX718	\$766,900.00	\$600,525.00		\$181,518.75	
Equipment and Labor for moving transmitter	\$2,500.00	\$2,500.00	N/A	N/A	N/A
Other Electrical Service: Upgrade the existing 400 amp service to a 600 amp service and add a 400 amp switch fused at 225 amps to power the new transmitter. The quote includes rigid conduit and wiring.	\$51,100.00	\$51,100.00	N/A	N/A	N/A
5 Ton system	\$20,250.00	\$19,250.00	N/A	N/A	N/A
Heat Exchanger Platform	\$2,150.00	\$2,150.00	N/A	N/A	N/A

Storage and Delivery	\$1,900.00	\$1,900.00	N/A	N/A	N/A
Electrical installation for HVAC	\$5,000.00	\$5,000.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 14.2 - 20 kW	\$684,000.00	\$518,625.00	N/A	\$181,518.75	N/A
Sub-total	\$766,900.00	\$600,525.00	N/A	\$181,518.75	N/A
Total for all systems	\$2,213,322.85	\$1,414,775.65	N/A	\$354,809.40	N/A

Actual Information Description	File Name
Equipment and Labor for moving transmitter	Information not provided.
Other Electrical Service: Upgrade the existing 400 amp service to a 600 amp service and add a 400 amp switch fused at 225 amps to power the new transmitter. The quote includes rigid conduit and wiring.	Information not provided.
5 Ton system	Information not provided.
Heat Exchanger Platform	Information not provided.
Storage and Delivery	Information not provided.
Electrical installation for HVAC	Information not provided.

UHF - Liquid Cooled Solid State Transmitter 14.2 - 20 kW	Component Description:	First payment for 35% down on 15kW transmitter is due now so I am requesting reimbursement for
		35% of this cost as shown in the
		invoice.
	Amount:	\$181,518.75

Antennas

Cost Information

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 ATC- BCE12C2- 23	\$255,260.00	\$84,600.00		\$30,300.00	
UHF - Lower Power Side Mount, One Station antenna . medium power (50- 200 kW), elliptically or circularly polarized	\$103,100.00	\$43,000.00	N/A	N/A	N/A
Storage	\$500.00	\$500.00	N/A	\$250.00	N/A
Shipping and Handling	\$3,850.00	\$3,850.00	N/A	\$1,925.00	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	\$2,500.00	N/A

Total for all systems	\$2,213,322.85	\$1,414,775.65	N/A	\$354,809.40	N/A
Sub-total	\$255,260.00	\$84,600.00	N/A	\$30,300.00	N/A
UHF - Lower Power Side Mount, One Station antenna . medium power (50- 200 kW), elliptically or circularly polarized	\$103,100.00	\$19,000.00	***System Notice: Estimate adjusted and locked because line has been superseded. ***	\$19,000.00	N/A
Sweep test of existing antenna	\$6,730.00	\$4,500.00	N/A	\$2,250.00	N/A
Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	\$9,570.00	\$4,000.00	N/A	\$2,000.00	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$4,750.00	N/A	\$2,375.00	N/A

File Name	
Information not provided.	
Component Description:	First payment of 50% for storage of antenna is due now so I am only requesting reimbursement for 50% of this cost as shown in the invoice. \$250.00
Component Description:	First payment of 50% for shipping and handling of antenna is due now so I am requesting reimbursement for 50% of this cost as shown in the invoice. \$1,925.00
Component Description:	First payment of 50% for antenna scattering study for side mounted directional antenna is due now so I am requesting reimbursement for 50% of this cost as shown on the
	Information not provided. Component Description: Amount: Amount: Amount:

high power antennas (if not	Component Description:	First payment of
included in antenna base	component Description.	50% for cost of
cost)		custom mounts for
		offset, 3 mount
		locations for
		antenna is due no
		so I am requestin
		reimbursement fo
		50% of this cost a
		shown on the
		invoice.
	Amount:	\$2,375.00
Elbow complex, single		
channel, at antenna input,	Component Description:	First payment of
per 4 1/16. feedline (if		50% for 3 1/8"
needed)		Elbow complex is
		due now so I am
		requesting
		reimbursement fo
		50% of this cost a
		shown on the
		invoice.
	Amount:	\$2,000.00
		<i> </i>
Sweep test of existing antenna		
	Component Description:	First payment of
		50% for Field
		Service System
		sweep is due now
		so I am requesting
		reimbursement fo
		50% of this cost a
		shown on the
		invoice.
	Amount:	\$2,250.00

antenna . medium power (50-200 kW), elliptically or circularly polarized	Component Description:	First payment of 50% for H-Pol Coaxial Slot antenna is due nov so I'm requesting reimbursement for 50% of this cost as shown on the invoice.
	Amount:	\$19,000.00

Transmission Line

Cost Information

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

Description Primary Transmission Line	Predetermined Cost Estimate \$136,400.00	Estimated Cost \$81,775.00	Estimated Cost Justification	Actual Cost \$28,096.25	Actual Cost Justification
Storage and Delivery	\$1,500.00	\$1,500.00	N/A	N/A	N/A
Rigid Transmission Line - copper, 4 1 /16"	\$134,900.00	\$80,275.00	N/A	\$28,096.25	N/A
Sub-total	\$136,400.00	\$81,775.00	N/A	\$28,096.25	N/A
Total for all systems	\$2,213,322.85	\$1,414,775.65	N/A	\$354,809.40	N/A

Actual Information Description	File Name	
Storage and Delivery	Information not provided.	
Rigid Transmission Line - copper, 4 1/16"	Component Description:	First payment for 35% down on 4 1 /16" transmission line is due now so I am requesting reimbursement for 35% of this cost as shown in the invoice. \$28,096.25

Tower Equipment and Rigging Costs

Cost Information

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	\$681,978.00	\$290,035.00		\$96,168.60	
Structural Analysis	\$5,000.00	\$5,000.00	N/A	\$5,000.00	N/A
Major tower reinforcement /modifications	\$421,000.00	\$129,127.00	N/A	\$38,738.10	N/A
Tall Tower (greater than 500')	\$210,500.00	\$128,647.00	N/A	\$38,594.10	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$8,083.00	N/A	\$8,083.00	N/A
Tower Rigging	\$19,178.00	\$19,178.00	N/A	\$5,753.40	N/A
Sub-total	\$681,978.00	\$290,035.00	N/A	\$96,168.60	N/A
Total for all systems	\$2,213,322.85	\$1,414,775.65	N/A	\$354,809.40	N/A

Actual Information	
Description	File Name

Structural Analysis		
	Component Description:	This invoice is a
		50% down
		payment for the
		signed and
		accepted proposal
		or quote. The
		signed proposal is
		in the attachments.
	Amount:	\$2,500.00
	Component Description:	FDH Velocitel
		Invoice #2 for the
		balance due for the
		Structural Analysis.
	Amount:	\$2,500.00
Major tower reinforcement /modifications		
	Component Description:	First payment of
		30% down for cost
		of all modifications
		of tower is due now
		so I'm requesting reimbursement for
		30% of this cost as
		shown in the
		invoice.
	Amount:	\$38,738.10
Tall Tower (greater than		
500')	Component Description:	First payment of
		30% for cost of
		antenna and line
		relocation and
		install is due now
		so I'm requesting
		reimbursement for
		30% of this cost as
		shown on the
		invoice.
	Amount:	\$38,594.10

Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study	Component Description:	Invoice is for remaining balance due after completion of scope of work performed.	
	Amount:	\$4,041.50	
	Component Description:	This invoice is a 50% down payment for the signed and accepted proposal or quote. The proposal is attached to the bottom of the invoice. It is also in the attachments. \$4,041.50	
Tower Rigging			
Tower Rigging	Component Description:	First payment of 30% for cost of tower rigging is due now so I'm requesting reimbursement for 30% of this cost as	
	Amount:	shown on the invoice. \$5,753.40	

Outside Professional Services

Cost Information

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 Justificatio
Outside Professional Services	\$293,315.00	\$286,225.80		\$14,975.80	
Additional Field Engineering Service, 22 Days	\$60,000.00	\$60,000.00	N/A	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	\$10,520.00	\$10,000.00	N/A	N/A	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
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$6,575.80	N/A	\$6,575.80	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
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 request for Special Temporary Authorization	\$4,100.00	\$3,000.00	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
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 request for Special Temporary Authorization	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Project management of the transition	\$79,000.00	\$75,000.00	N/A	N/A	N/A

Prepare and or review reimbursement	\$2,630.00	\$2,500.00	N/A	N/A	N/A
form Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$8,400.00	The cost of addressing transition timing and coordination issues take much more time and therefore the attorney fees are much higher than the predetermined cost.	\$8,400.00	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Sub-total	\$293,315.00	\$286,225.80	N/A	\$14,975.80	N/A
Total for all systems	\$2,213,322.85	\$1,414,775.65	N/A	\$354,809.40	N/A

Components

Actual Information Description	File Name
Additional Field Engineering Service, 22 Days	Information not provided.
RF Exposure Measurements	Information not provided.
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	Information not provided.

	1	
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.	
Perform engineering study for new channel assignment and antenna development	Component Description:	Invoice for creating spread sheet to compare various transmission line sizes and affect upon required Transmitter Power Output with various antenna configurations. \$3,775.00
	Amount:	\$3,775.00
	Component Description:	Invoice for services rendered including performing a TV Study coverage and interference analysis, including compliance with coverage requirements for three different antennas.
	Amount:	\$2,800.80
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare request for Special	Information not provided.	

ormation not provided. ormation not provided. ormation not provided. ormation not provided.	Payment of \$1000.00 is due now for transition and timing issues
ormation not provided.	\$1000.00 is due now for transition and timing issues
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ormation not provided.	\$1000.00 is due now for transition and timing issues
	\$1000.00 is due now for transition and timing issues
mponent Description:	\$1000.00 is due now for transition and timing issues
nount:	so I'm requesting reimbursement for \$1000.00 as shown in the invoice. \$1,000.00
mponent Description:	Payment of \$700.00 is due now for transition and timing issues so I'm requesting reimbursement for \$700.00 as shown in the invoice.
	mponent Description: nount:

Component Description:	Payment of \$750.00 is due now for transition and timing issues so I'm requesting reimbursement for \$750.00 as shown in the invoice. \$750.00
Component Description:	Payment of \$300.00 is due now for transition and timing issues so I'm requesting reimbursement of \$300.00 as shown in the invoice. \$300.00
Component Description:	Payment of \$1450.00 is due now for transition and timing issues so I'm requesting reimbursement for \$1450.00 as shown in the invoice. \$1,450.00
Component Description:	Payment of \$200.00 is due now for transition and timing issues so I'm requesting reimbursement for \$200.00 as shown in the invoice. \$200.00

	Component Description:	Payment of
		\$4000.00 is due
		now for transition
		and timing issues
		so I'm requesting
		reimbursement for
		\$4000.00 as show
		in the invoice.
	Amount:	\$4,000.00
Comprehensive coverage	Information not provided.	
verification via field study, if		
needed		

Other Expenses

Cost Information

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	\$79,469.85	\$71,614.85		\$3,750.00	
DTV Medical Facility Notification	\$11,550.00	\$3,750.00	N/A	\$3,750.00	N/A
Develop and air announcement of upcoming channel change	\$10,000.00	\$10,000.00		N/A	N/A
MVPD Notification of Channel Change	\$10,000.00	\$10,000.00	N/A	N/A	N/A
In-House Labor Reimbursement Costs	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Bathroom Facilities	\$123.85	\$123.85	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$36,156.00	\$36,156.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	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 - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A
Sub-total	\$79,469.85	\$71,614.85	N/A	\$3,750.00	N/A
Total for all systems	\$2,213,322.85	\$1,414,775.65	N/A	\$354,809.40	N/A

Components

Actual Information Description	File Name	
DTV Medical Facility Notification	Component Description: Amount:	First payment for first stage of medical notification preparation. \$3,750.00
Develop and air announcement of upcoming channel change	Information not provided.	
MVPD Notification of Channel Change	Information not provided.	
In-House Labor Reimbursement Costs	Information not provided.	
Bathroom Facilities	Information not provided.	
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.	
FCC Filing Fees - Special Temporary Authorization request	Information not provided.	
FCC Filing Fees - Form 2100 license to cover application	Information not provided.	

change CP

Cost	Grand Total						
Information		Predetermined Cost Estimate	Estimated Cost	Actual Cost			
	Total for all systems	\$2,213,322.85	\$1,414,775.65	\$354,809.40			

Reimbursem	enrestanus	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	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.	
		 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. 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).
- The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
- 7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8.	The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.	
an au name	are, under penalty of perjury, that I am thorized representative of the above- d applicant for the Authorization(s) ied above.	Ronald P. Yager Vice- President /General Manager 04/10/2018

Certification	Section	Question	Response
Certification	Submission of Actual Cost Documentation Statements	WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (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).	
		 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).
- 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.

	The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission. 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.	
an aut nameo	are, under penalty of perjury, that I am horized representative of the above- d applicant for the Authorization(s) ied above.	Ronald P. Yager Vice President /General Manager
		04/10/2018

Attachments