



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **24485** | Service: **DTV** | Call **KGEB** | Channel:
ID: | Sign:
12 (High VHF) | File **0000029080**
Number:
FRN: **0008120529** | Date **06/18**
Submitted: **/2018**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
UNIVERSITY BROADCASTING, INC. Doing Business As: KGEB	Bill Lee 7777 SOUTH LEWIS AVENUE TULSA, OK 74171 United States	+1 (918) 488-5300	blee@oru.edu	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
Joseph C. Chautin III <i>Hardy, Carey, Chautin & Balkin</i>	1080 West Causeway Approach Mandeville, LA 70471 United States	+1 (985) 629-0777	jchautin@hardycarey.com

Broadcaster Information and Transition Plan

Question	Response
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<p>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.</p>	<p>Yes</p>
<p>Briefly describe transition plan</p>	<p>Remove old Analog ant., waveguide, TX, strobe light from Analog antenna, replace with new VHF Antenna ,Strobe light, and TX line. Remove old Analog TX, plate supply, BP filter; set new VHF Transmitter, TX Room only shared with KWHB- Separate UHF-antenna.</p>

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

**Primary
Transmitter**

Add 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	NV-7250
	Year	2002
	Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power Capacity	3.45 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?	No
	Manufacturer	
	Model	THV9
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	3.9 kW
	Justification for New Transmitter	Cannot re-tune Rohde & Schwarz UHF Transmitter to VHF. Can't build out on 14 due to Land Mobile issues, so FCC granted CP Mod on Ch. 12 instead. Current Rohde & Schwarz UHF Transmitter is no longer supported.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
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Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	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

Primary 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
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	Top 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)	50.0 kW

Manufacturer	
Model	SWEDT160M /49
Year	2002

**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?	Yes
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Top 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)	75.0 kW
Manufacturer		

Model	THV-7A12-R O4
Year	2018
Justification for New Antenna	Can't re-tune UHF Channel 49 antenna to VHF Channel 12.

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?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary
Antenna**

Other Antenna Cost Not Listed

Name	Description
Mounting bracket for top mount antenna	Top Mount antenna needs a bracket to mount the antenna to a 4 foot thick concrete & steel shear wall.

**Transmission
Line**

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

**Primary
Transmission
Line**

Add 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 this transmission currently shared with any other stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	Flexible Air
	Diameter	1 5/8 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	75 feet per run

**Primary
Transmission
Line**

New 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	Flexible Air
	Diameter	3 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	200 feet per run
	Justification for New Transmission Line	Can't use existing line as it will be in use during testing time, as well as not in the location needed to mount the VHF Ch. 12 antenna.

**Primary
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?	Located on Building
	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?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1013337
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	36° 02' 35.0" N-
	Longitude (NAD83)	095° 57' 12.0" W-
	Overall Structure Height	699.14 feet
	Support Structure Height	662.07 feet

Ground Elevation Above Mean Sea Level (AMSL)	623.68 feet
Structure Type	BANT - Building with an Antenna
Tower Owner	ORAL ROBERTS UNIVERSITY
Date Constructed	08/01/1995

Primary Tower

Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	No study needed
Tower Reinforcements	Please select whether tower reinforcements are needed:	Minor Reinforcements needed

Primary Tower

Tower Rigging Costs

Section	Question	Response
Tower Rigging Costs	Complex Tower	Located on Building
Helicopter Services Required	Are helicopter services required?	Yes

Primary Tower

Other Tower Expenses Not Listed

Name	Description
Remove Ch. 49 Antenna	After transition to Ch. 12 need to remove Ch. 49 antenna and transmission line. along with waveguide from Analog antenna being removed to allow new VHF Antenna installation mount new LED Strobe on new VHF 12 antenna

Remove Analog 53 antenna

Need to remove Analog 53 Antenna and undocumented mount to make room for Ch. 12 antenna, replace strobe light.

Outside Professional Services Costs

Section	Question	Response
<p>Outside Project Management Services</p>	<p>Do you require outside project management services?</p>	<p>Yes</p>
	<p>Number of Hours</p>	<p>643</p>
	<p>Explanation</p>	<p>Planning/ CP Transition Pre-Planning, Planning and Construction, then commissioning after construction. Additionally, KGEB will hire an outside firm to facility to handle reimbursement filing and ensure a timely transition.</p>
<p>Outside RF consulting Engineering Services</p>	<p>Perform engineering study for new channel assignment and antenna development</p>	<p>Yes</p>
	<p>Prepare engineering section of Form FCC Construction Permit Application</p>	<p>Yes</p>
	<p>For Auxiliary Facility</p>	<p>No</p>
	<p>For Main Facility</p>	<p>Yes</p>
	<p>Prepare engineering section of Form FCC License to Cover Application</p>	<p>Yes</p>
	<p>For Auxiliary Facility</p>	<p>No</p>
	<p>For Main Facility</p>	<p>Yes</p>
	<p>Prepare request for Special Temporary Authority</p>	<p>Yes</p>
	<p>Quantity</p>	<p>1</p>
<p>Do you have Distributed Transmission System engineering services?</p>	<p>N/A</p>	

	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	No
	Quantity	N/A
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
Prepare or Review FCC Form 399 for Reimbursement	Yes	
Address transition timing and coordination issues w/ other stations and wireless providers	Yes	
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 **Other Professional Services Expenses Not Listed**
Professional Information not provided.
Services
Costs

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	No
	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?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

**Other
Expenses**

Other Expenses Not Listed

Information not provided.

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 THV9	\$313,250.00	\$257,129.00		\$49,132.27	
High VHF - Liquid Cooled Solid State Transmitter 3.3 . 6.5 kW	\$249,500.00	\$196,529.00	N/A	\$49,132.27	N/A
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	\$0.00	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	Run circuits for THV-9 transmitter, dummy load, etc	N/A	N/A
Sub-total	\$313,250.00	\$257,129.00	N/A	\$49,132.27	N/A
Total for all systems	\$1,798,005.40	\$1,017,564.77	N/A	\$212,235.35	N/A

Components

Actual Information	
Description	File Name
High VHF - Liquid Cooled Solid State Transmitter 3.3 . 6.5 kW	<p>Component Description: 25% down payment Transmitter THV9-3</p> <p>Amount: \$49,132.27</p>

Transformer 3 phase/480v - 150 KVA	Information not provided.
Switchgear - industrial 800 amp	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 THV-7A12-R O4	\$431,528.20	\$236,022.48		\$121,459.53	
Mounting bracket for top mount antenna	<i>\$31,298.20</i>	\$31,298.20	ANSI Certified mounting bracket for Top Mounted Antenna to Concrete reinforced Shear wall. Current Mount from 1995 does not meet current standards Final Estimate increased due to design change and cost of steel.	\$8,125.00	N/A
High-VHF, One station antenna -- top mount, elliptically or circularly polarized	\$393,500.00	\$198,324.28	N/A	\$113,334.53	N/A

Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Sub-total	\$431,528.20	\$236,022.48	N/A	\$121,459.53	N/A
Total for all systems	\$1,798,005.40	\$1,017,564.77	N/A	\$212,235.35	N/A

Components

Actual Information	
Description	File Name
Mounting bracket for top mount antenna	Component Description: TV Antenna Wall Mounting Bracket Design Amount: \$2,500.00
	Component Description: TV Antenna Wall MOUNTing Bracket Design Amount: \$2,125.00
	Component Description: Professional services for antenna Amount: \$375.00
	Component Description: Professional services Amount: \$1,000.00
	Component Description: TV Antenna Wall Mounting Bracket Design Amount: \$2,125.00

High-VHF, One station antenna -- top mount, elliptically or circularly polarized	Component Description: High VHF TV ANT THV 7A 12-R VP-04 H-POL Pricing Amount: \$113,334.53
Sweep test of existing antenna	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	\$11,800.00	\$10,100.09		\$4,579.55	
Flexible Air Transmission Line - dielectric, 3"	\$11,800.00	\$10,100.09	N/A	\$4,579.55	N/A
Sub-total	\$11,800.00	\$10,100.09	N/A	\$4,579.55	N/A
Total for all systems	\$1,798,005.40	\$1,017,564.77	N/A	\$212,235.35	N/A

Components

Actual Information	
Description	File Name
Flexible Air Transmission Line - dielectric, 3"	<p>Component Description: New Primary Transmission Line</p> <p>Amount: \$4,579.55</p>

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 BANT	\$778,750.00	\$264,750.00		\$3,000.00	
Minor tower reinforcement /modifications	\$158,000.00	\$15,000.00	N/A	\$3,000.00	N/A
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$50,000.00	X-Ray analysis of 4 foot thick Shear Wall, concrete core drilling for attachment. Site Survey of roof shear Wall by antenna installation company to verify path of transmission line to new antenna mount location.	N/A	N/A
Remove Ch. 49 Antenna	<i>\$71,275.00</i>	\$71,275.00	Remove DT-49 antenna after sign off, remove Heliac line and cover Heliac line hole in steel cover, clean up roof top.	N/A	N/A

Remove Analog 53 antenna	<i>\$2,400.00</i>	\$2,400.00	Removal of Analog antenna incorporated in Helicopter lift quote.	N/A	N/A
Tower Helicopter Lift	<i>\$126,075.00</i>	\$126,075.00	Remove old Antenna Ch. 53 Analog, Prep wall for new TIAA/ ANSI compliant antenna mount. Hang and rig new VHF Ch. 12 Digital Antenna with new strobe , Lift old TX Heat ex.Lift new TX Heat ex. Run 3" Heliac from transmitter room to new Ch. 12 antenna.	N/A	N/A
Sub-total	\$778,750.00	\$264,750.00	N/A	\$3,000.00	N/A
Total for all systems	\$1,798,005.40	\$1,017,564.77	N/A	\$212,235.35	N/A

Components

Actual Information Description	File Name
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<p>Minor tower reinforcement /modifications</p>	<p>Component Description:</p> <p>Travel and site visit to inspect proposed antenna installation for DTV Repack work, consultation on installation procedures, engineering and cost related to this work.</p> <p>Amount:</p> <p>\$3,000.00</p>
<p>Complex Tower (includes, for example, those with candelabras and/or stacked antennas)</p>	<p>Information not provided.</p>
<p>Remove Ch. 49 Antenna</p>	<p>Information not provided.</p>
<p>Remove Analog 53 antenna</p>	<p>Information not provided.</p>
<p>Tower Helicopter Lift</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	\$233,874.00	\$221,325.00		\$23,940.80	
RF Exposure Measurements	\$21,050.00	\$10,000.00	N/A	N/A	N/A
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 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	Needed STA due to inability to construct on UHF 14 due to Land Mobile Interference issues. Needed STA to allow time to prepare CP Major Mod for move to VHF Ch. 12	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

Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$16,625.00	Additional studies needed to prove which channels were suitable to construct on due to inability to construct on Ch. 14 due to LM interference with two LM licensees on roof of antenna location. Ch. 14 should not have been assigned in the first place.	\$16,625.00	Awaiting explanation
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	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	\$101,594.00	\$96,450.00	N/A	\$7,315.80	Final work for project management will be submitted upon completion of Antenna installation.

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A
Sub-total	\$233,874.00	\$221,325.00	N/A	\$23,940.80	N/A
Total for all systems	\$1,798,005.40	\$1,017,564.77	N/A	\$212,235.35	N/A

Components

Actual Information	
Description	File Name
RF Exposure Measurements	Information not provided.
Comprehensive coverage verification via field study, if needed	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.
Prepare request for Special Temporary Authorization	Information not provided.
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Perform engineering study for new channel assignment and antenna development	

Component Description: Engineering study work for new channel 14 assignment and antenna development. Conduct a search of the VHF & UHF bands to determine the availability of an alternate channel.

Amount: \$2,625.00

Component Description: RF Consulting Engineering to determine correct mask filter to avoid interference.

Amount: \$5,000.00

Component Description: Auction Repack Work: Engineering study work for new channel 14 assignment and antenna development. Conduct a search of the VHF and UHF bands to determine the availability of an alternate channel.

Amount: \$2,500.00

	<p>Component Description: Eng. study work for new ch14 assign ant development. Conduct a search of the VHF and UHF bands to determine the availability of an alternate channel. Prepare early transition waiver supporting statement. Prep app for ch. 12.</p> <p>Amount: \$5,500.00</p> <p>Component Description: Study potential for KGEB to operate on VHF Channel 12</p> <p>Amount: \$1,000.00</p>
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.
Prepare and or review reimbursement form	Information not provided.

<p>Project management of the transition</p>	<p>Component Description: Project management</p> <p>Amount: \$3,661.10</p> <p>Component Description: Project management</p> <p>Amount: \$2,454.70</p> <p>Component Description: Planning CP Site visit - Transition Preplanning Revised to show cost split for travel expenses between KGEB & KWHB</p> <p>Amount: \$1,200.00</p>
<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<p>Information not provided.</p>

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	\$28,803.20	\$28,238.20		\$6,423.20	
Local Zoning	<i>\$500.00</i>	\$500.00	estimated cost for zoning permits	N/A	N/A
MVPD Notification of Channel Change	<i>\$2,723.20</i>	\$2,723.20	postage and certified letters to MVPD for channel change. See attached invoice.	\$2,723.20	N/A
Develop and air announcement of upcoming channel change	<i>\$500.00</i>	\$500.00	Voice over talent fees for MVPD spots	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	STA # 0000024881 / Document # PGC2960746 - filed due to inability to construct on assigned Channel 14 due to Land Mobile interference issues on tower.	\$0.00	N/A
Equipment Delivery and Handling Charges	<i>\$5,000.00</i>	\$5,000.00	Estimate to deliver transmitter, antenna, transmission line, and antenna mount	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$5,000.00</i>	\$5,000.00	Disposal of analog I transmitter, bandpass filter, to facilitate installation in transmitter room	\$3,700.00	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Equipment Storage	<i>\$3,000.00</i>	\$3,000.00	N/A	N/A	N/A
Sub-total	\$28,803.20	\$28,238.20	N/A	\$6,423.20	N/A
Total for all systems	\$1,798,005.40	\$1,017,564.77	N/A	\$212,235.35	N/A

Components

Actual Information Description	File Name
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Local Zoning	Information not provided.
MVPD Notification of Channel Change	<p>Component Description: MVPD Notification Services</p> <p>Amount: \$2,723.20</p>
Develop and air announcement of upcoming channel change	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	Information not provided.
FCC Filing Fees - Special Temporary Authorization request	Information not provided.
Equipment Delivery and Handling Charges	<p>Component Description: Electrical work to remove and dispose of (1) 4KVA dry type transformer, (3) cabinet units and (1) rack</p> <p>Amount: \$3,700.00</p>
Disposal Costs (for equipment and other waste, net of any salvage value)	<p>Component Description: Electrical work to remove and dispose of (1) 4KVA dry type transformer, (3) cabinet units and (1) rack mounted pump unit.</p> <p>Amount: \$3,700.00</p>
DTV Medical Facility Notification	Information not provided.
Equipment Storage	Information not provided.

Cost Information **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,798,005.40	\$1,017,564.77	\$212,235.35

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

4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

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

Hugh Mills
President

06/18/2018

Certification	Section	Question	Response
	<p>Submission of Actual Cost Documentation Statements</p>	<p>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).</p>	
		<ol style="list-style-type: none"> 1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct. 3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 	

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

8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

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.

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

Hugh Mills
President

06/18/2018

Attachments