

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility ID:	38497	Service: DCA	Call Sign:	KADO-CD	Channel: 36 (UHF)
File Number:	000002	4419	5		
FRN: 000	5870498	Date Submitted:	05/23 /2018		

Applicant Name, Type, and Contact Information

Applicant Information

Applicant	Address	Phone	Email	Applicant Type
WORD OF LIFE MINISTRIES, INC. Doing Business As: WORD OF LIFE MINISTRIES, INC.	Chad Giddens 4425 Meriwether Rd SHREVEPORT, LA 71109 United States	+1 (318) 688- 4411	wolmedia@mac. com	Not-for- Profit

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
	The Preparer is same as the reimbursement contact.			

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.	No
Briefly describe transition plan	Change the antenna to a broadband antenna that is able to broadcast on the existing channel and our new channel. Replace Mask filter for new channel. Use existing transmission line, and transmitter.

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

Existing Transmitter Information

Primary	Existing Transmitter Infor	mation	
Transmitter	Section	Question	Response
	Existing Transmitter Description	Type of change	Retune Existing
		Use	Primary (Main)
		Ownership	Owned
		Owner	N/A
		Is this transmitter currently shared with another station?	No
		Is this transmitter currently in operating condition?	Yes
	Existing Transmitter	Manufacturer	Anywave
	Manufacturer and Type	Model	ATC5XU
		Year	2017

Туре	Solid State
Solid State Cooling	Air Cooled
Solid State Power capacity	1.7 kW

Primary	Retuning Transmitter Cos	ts	
Transmitter	Section	Question	Response
	New IOT Tubes	Number of Tubes (including accessories) needed	N/A
	New Mask Filter	Power	3 kW
		Other Power	N/A
	New Exciter	Is a new exciter needed?	No

Primary Other Transmitter Costs

Response
No
No
No
N/A
No
N/A
N/A
No
N/A
No
N/A
N/A

	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

Other Transmitter Cost Not Listed

PrimaryOther Transmitter CoTransmitterInformation not provided.

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

Primary	Add 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 this antenna currently shared with any other stations?	No	
		Is this antenna directional?	No	
		Is antenna in operating condition?	Yes	
		Is antenna located on or in close proximity to an antenna farm?	No	
	Existing Antenna	Class	Class A	
	Manufacturer and Type	Mounting	Side Mount	
		Antenna position in stack	Тор	
		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)	15.0 kW	

Manufacturer	
Model	PSILP80I- 40
Year	2015

Primary	New Antenna Costs			
Antenna	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?	Yes	
		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	Class	Class A	
	Manufacturer and Types	Mounting	Side Mount	
		Antenna position in stack	Тор	
		Polarization	Horizontal	
		Туре	Broadband Slot	
		Number of Stations Supported	1	
		Number of Panels/Bays	8	
		Lower Limit	602.00 MHz	
		Upper Limit	632.00 MHz	
		Design power capacity in use	90.0 %	
		Other Antenna Type	N/A	
		ERP: (Effective Radiated Power)	15.0 kW	
		Manufacturer		

Model	JA SS-8
	D36 D40
	SHO BB
Year	2018
Justification for New Antenna	channel
	change.
	Adding a
	broadband
	antenna
	allows us to
	utilize our
	existing
	transmissio
	line and we
	will not have
	to use an
	interim
	antenna or
	line.

Primary Other Antenna Costs

Filliary			
Antenna	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?	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
AntennaOther Antenna Cost Not ListedInformation not provided.

Transmissior	Sentien	Question	Response
	Transmission Line Related Expenses	Do you have transmission line related expenses?	No

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

Primary	Existing Tower			
Tower	Section	Question	Response	
	Existing Tower Description	Type of change	Move Equipment	
		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?	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	Do you have a tower registration number?	Yes	
Registration Coordinates (<u>NAD83</u> (North American Datum of 1983))	Registration	ASR Number	1020975	
	North American Datum of	Latitude (NAD83)	32° 29' 35.5" N-	
	Longitude (NAD83)	093° 45' 53.3" W-		

Overall Structure Height	306.10 feet
Support Structure Height	279.85 feet
Ground Elevation Above Mean Sea Level (AMSL)	245.08 feet
Structure Type	LTOWER - Lattice Tower
Tower Owner	American Towers, LLC.
Date Constructed	10/30/1995

Primary Tower Section

Section	Question	Response
Tower Rigging Costs	Complex Tower	N/A
Helicopter Services Required	Are helicopter services required?	No

Other Tower Expenses Not Listed

PrimaryOther Tower ExpenseTowerInformation not provided.

Outside	Section	Question	Response
Professional	Services Costs Outside Project Management Services	Do you require outside project management services?	No
		Number of Hours	N/A
		Explanation	N/A
	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	No
		Quantity	N/A
		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	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	No
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Other Professional Services Expenses Not Listed

Professional	Services Costs	Description	
	Project Managemnet	Project management hours for in-house management of repack	

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	No
		FCC License to Cover Application	No
		FCC Special Temporary Authority Application	No
	Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	No
		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?	No

Other Expenses Not Listed

Other Expenses	Other Expenses Not Listed				
	Name	Description			
	Tower Fees	structural analysis, zoning / permitting fees / technical drawings for new equipment on 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 ATC5XU	\$109,355.00	\$5,365.00		\$5,365.50	
UHF and VHF - minor banding issues	\$105,200.00	\$0.00	N/A	\$0.00	N/A
3 kW mask filter	\$4,155.00	\$5,365.00	Our existing filter is an 8pole 2KW supplied by the transmitter manufacturer and designed to work with the transmitter software for monitoring and error correction. This is the exact items replacement cost supplied by the manufacturer.	\$5,365.50	This is the replacement cost for the 6 pole filter provided by the transmitter manufacturer. It's an item- for-item replacement. It's designed to work with the transmitters monitoring and error correction software.
Sub-total	\$109,355.00	\$5,365.00	N/A	\$5,365.50	N/A
Total for all systems	\$297,745.00	\$96,312.00	N/A	\$8,433.55	N/A

Actual Information	
Description	File Name

UHF and VHF - minor banding issues	Information not provided.	
3 kW mask filter		
	Component Description:	Full price for
		Mask Filter
	Amount:	\$5,365.50

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 JA SS- 8 D36 D40 SHO BB	\$33,030.00	\$15,500.00		\$0.00	
UHF - Lower Power Side Mount, Class A One Station antenna basic	\$26,300.00	\$9,500.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,000.00	N/A	N/A	N/A
Sub-total	\$33,030.00	\$15,500.00	N/A	\$0.00	N/A
Total for all systems	\$297,745.00	\$96,312.00	N/A	\$8,433.55	N/A

Components

Information not provided.

Cost Transmission Line

Information Information not provided.

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).

			Estimated		
	Predetermined	Estimated	Cost	Actual	Actual Cost
Description	Cost Estimate	Cost	Justification	Cost	Justification
Primary Tower LTOWER	\$84,200.00	\$17,095.00		\$0.00	
Short Tower (less than 500')	\$84,200.00	\$17,095.00	ADO Repack Quote Install temp. trans line. Move existing antenna. Install new antenna. Remove temp equipment. This price is the remainder on the KADO Repack Quote after transmission line and line sweep have been removed.	N/A	N/A
Sub-total	\$84,200.00	\$17,095.00	N/A	\$0.00	N/A
Total for all systems	\$297,745.00	\$96,312.00	N/A	\$8,433.55	N/A

Information not provided.

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 Justification
Outside Professional Services	\$28,530.00	\$23,750.00		\$3,068.05	
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$2,000.00	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	\$4,000.00	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 engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$1,500.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$971.25	N/A
Prepare and or review reimbursement form	\$2,630.00	\$1,500.00	N/A	\$596.80	N/A
Project Managemnet	\$2,500.00	\$2,500.00	N/A	N/A	N/A
Sub-total	\$28,530.00	\$23,750.00	N/A	\$3,068.05	N/A
Total for all systems	\$297,745.00	\$96,312.00	N/A	\$8,433.55	N/A

Actual Information Description	File Name
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.
Attorney Fees - Prepare and File 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 engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	CP permit prep. \$1,500.00
Perform engineering study for new channel assignment and antenna development	Component Description: Amount:	Review FCC transition letter for KADO, communicate with KADO about repack, timing, filing 399 and next steps. \$370.00
	Component Description:	Run FCC TVstudy software for KADO. Communicate with KADO management about process for filing. \$601.25

Prepare and or review		
reimbursement form	Component Description:	Correspondence on 399 form prep and
		filing.
	Amount:	\$162.00
	Component Description:	Invoice prep for
		filings.
	Amount:	\$185.00
	Component Description:	communicate with
		attorney, engineer,
		and KADO
		management on
		399 filing and info
	Amount:	\$64.80
	Component Description:	399 review
	Amount:	\$185.00
Project Managemnet	Information not provided.	

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	\$42,630.00	\$34,602.00		\$0.00	
Develop and air announcement of upcoming channel change	\$1,000.00	\$1,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$3,522.00	N/A	\$0.00	N/A
Tower Fees	\$30,080.00	\$30,080.00	This is ESTIMATED services/ fess provided by the tower owner, American Tower, for structural analysis, technical drawings, some project management, and miscellaneous fees/ services for adding, and removing broadcast equipment at tower site.	N/A	N/A
Sub-total	\$42,630.00	\$34,602.00	N/A	\$0.00	N/A
Total for all systems	\$297,745.00	\$96,312.00	N/A	\$8,433.55	N/A

Actual Information Description	File Name	
Develop and air announcement of upcoming channel change	Information not provided.	
DTV Medical Facility Notification	Component Description:	100% due when order for work is placed. Will place the order now and it will be scheduled for Jan 2019. \$3,522.00
Tower Fees	Information not provided.	

Grand Total				
	Predetermined Cost Estimate	Estimated Cost	Actual Cost	
Total for all systems	\$297,745.00	\$96,312.00	\$8,433.55	
		Predetermined Cost Estimate	Predetermined Cost Estimate Estimated Cost	

Reimbursem	envestialus	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.	
I declare, under penalty of perjury, that I am an authorized representative of the above- named applicant for the Authorization(s) specified above.	Chad Giddens Media Manager 05/23/2018

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 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 au name	are, under penalty of perjury, that I am thorized representative of the above- d applicant for the Authorization(s) ied above.	Chad Giddens Media Manager
		05/23/2018

Attachments