



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **60384** | Service: **DTV** | Call **KYLE-TV** | Channel: **29 (UHF)** |  
ID: | Sign:  
File **0000028560**  
Number:  
FRN: **0009961889** | Date **06/03**  
Submitted: **/2019**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>NEXSTAR BROADCASTING, INC.</b> Doing Business As:	Elizabeth Ryder 545 E.JOHN CARPENTER FREEWAY SUITE 700 IRVING, TX 75062 United States	+1 (972) 373- 8800	eryder@nexstar. tv	Corporation

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address	Phone	Email
<b>Elizabeth Ryder</b> <i>General Counsel</i> <i>Nexstar Broadcasting,</i> <i>Inc.</i>	Elizabeth Ryder 545 E. John Carpenter Freeway Suite 700 Irving, TX 75062 United States	+1 (972) 373- 8800	eryder@nexstar. tv

## 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	See attached Transition Plan document.

## Transmitters

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

## Primary Transmitter

### Existing Transmitter Information

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 and Type	Manufacturer	R & S
	Model	NV8200E
	Year	2003
	Type	Solid State

	Solid State Cooling	Air Cooled
	Solid State Power capacity	1 kW

**Primary  
Transmitter**

**Retuning Transmitter Costs**

Section	Question	Response
<b>New IOT Tubes</b>	Number of Tubes (including accessories) needed	N/A
<b>New Mask Filter</b>	Power	3 kW
	Other Power	N/A
<b>New Exciter</b>	Is a new exciter needed?	No

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	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	No
	Description	N/A
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A

<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

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

**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?	Yes
	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)	50.0 kW

Manufacturer	
Model	ATW32G4- HSS-28
Year	1997

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?	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 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) .....	50.0 kW
	Manufacturer	



Model	TFU-25JSC /VP-R C200
Year	2017
Justification for New Antenna	Existing coaxial slot antenna is not designed to operate on repacked channel.

## Primary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	6 1/8 inches inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No

<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes
-------------------	--	-----

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Interim  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Slot
	Number of Stations Supported	1
	Number of Panels/Bays	16
	Lower Limit	470.00 MHz
	Upper Limit	630.00 MHz
	Design power capacity in use	50.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	100.0 kW
	Manufacturer	
	Model	TFU-16WB
	Year	2017

	Justification for New Antenna	No backup antenna so this is needed to ensure there are no extended outages while the primary antenna is removed and replaced. New flex line will be easier to install than trying to connect to the existing line.
--	-------------------------------	---

## Interim Antenna

### Other Antenna Costs

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

**Interim  
Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Transmission Line**

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

**Primary Transmission Line****Existing Transmission Line**

Section	Question	Response
Existing Transmission Line Description	Type of change	Utilize Existing
	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	DIELECTRIC
	Type	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	800 feet per run

Primary Transmission Line

Other Transmission Line Expenses Not Listed

Name	Description
Transmission line sweep test	Transmission line sweep test

Interim Transmission Line

New Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Flexible Air
	Diameter	3 inches
	Segment Length	N/A
	Other Segment Length	
	Number of parallel runs	1
	Length	350 feet per run
	Justification for New Transmission Line	this is line for interim antenna. No existing backup antenna or line so this allows the station to remain on-air while primary antenna is being removed.

Interim Transmission Line

Other Transmission Line Expenses Not Listed

Information not provided.

**Tower  
Equipment  
And  
Rigging  
Costs**

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

**Primary  
Tower**

**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	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	1047731
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	30° 41' 16.2" N-
	Longitude (NAD83)	096° 25' 32.4" W-
	Overall Structure Height	654.85 feet
	Support Structure Height	650.91 feet
	Ground Elevation Above Mean Sea Level (AMSL)	367.12 feet



Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	American Towers, LLC
Date Constructed	09/28/2009

**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:	Minor Reinforcements needed

**Primary  
Tower**

**Tower Rigging Costs**

Section	Question	Response
Tower Rigging Costs	Complex Tower	N/A
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
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	80
	Explanation	It will be necessary to schedule and coordinate multiple vendors, complete progress reports, and update Schedule 399. Station does not have available personnel or personnel trained in project management for such complex projects.
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes

	Quantity	1
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	No
<b>RF Field Engineering Services</b>	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 Professional Services Costs**      **Other Professional Services Expenses Not Listed**  
Services not provided.

## Other Expenses

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
<b>Permit and Filing Costs</b>	Local Zoning	Yes
	Non-zoning permits	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
	Does this relocation require Equipment Storage?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

<b>Other Expenses</b>	<b>Other Expenses Not Listed</b> 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 NV8200E	\$109,355.00	\$103,950.00		\$0.00	
UHF and VHF - minor banding issues	\$105,200.00	\$100,000.00	N/A	N/A	N/A
3 kW mask filter	\$4,155.00	\$3,950.00	N/A	N/A	N/A
Sub-total	\$109,355.00	\$103,950.00	N/A	\$0.00	N/A
Total for all systems	\$858,565.00	\$886,715.00	N/A	\$10,041.00	N/A

Components

Information not provided.

## Cost Information

### Antennas

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Interim Antenna TFU-16WB</b>	<b>\$96,130.00</b>	<b>\$91,400.00</b>		<b>\$0.00</b>	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$0.00	N/A
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
<b>Primary Antenna TFU-25JSC/VP-R C200</b>	<b>\$108,430.00</b>	<b>\$103,100.00</b>		<b>\$0.00</b>	
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$11,700.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A



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
<b>Sub-total</b>	\$204,560.00	\$194,500.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$858,565.00	\$886,715.00	N/A	\$10,041.00	N/A

### Components

Information not provided.

Cost  
Information

Transmission Line

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Interim Transmission Line	\$20,650.00	\$19,600.00		\$0.00	
Flexible Air Transmission Line - dielectric, 3"	\$20,650.00	\$19,600.00	N/A	N/A	N/A
Primary Transmission Line	\$6,400.00	\$6,400.00		\$6,400.00	
Transmission line sweep test	\$6,400.00	\$6,400.00	Sweep test of existing line for repack feasibility	\$6,400.00	N/A
Sub-total	\$27,050.00	\$26,000.00	N/A	\$6,400.00	N/A
Total for all systems	\$858,565.00	\$886,715.00	N/A	\$10,041.00	N/A

Components

Actual Information	
Description	File Name
Flexible Air Transmission Line - dielectric, 3"	Information not provided.
Transmission line sweep test	<div>Component Description: Transmission line sweep test</div> <div>Amount: \$6,400.00</div>

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 GTOWER	\$394,800.00	\$448,500.00		\$0.00	
Tall Tower (greater than 500')	\$210,500.00	\$272,000.00	SEE ATTACHED TOWER RIGGING ESTIMATE. TRANSMISSION LINE SWEEPS WERE REMOVED FROM THIS VALUE.	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$26,500.00	Per ATC, estimate to map and execute structural analysis is this amount.	N/A	N/A
Sub-total	\$394,800.00	\$448,500.00	N/A	\$0.00	N/A
Total for all systems	\$858,565.00	\$886,715.00	N/A	\$10,041.00	N/A

Components

Information not provided.

## Cost Information

### Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Outside Professional Services</b>	<b>\$40,720.00</b>	<b>\$38,250.00</b>		<b>\$3,641.00</b>	
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$0.00	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	\$2,050.00	\$1,500.00	N/A	N/A	N/A
Project management of the transition	\$12,640.00	\$12,000.00	It will be necessary to schedule and coordinate multiple vendors, complete progress reports, and update Schedule 399. Station does not have available personnel or personnel trained in project management for such complex projects.	\$3,641.00	N/A
<b>Sub-total</b>	\$40,720.00	\$38,250.00	N/A	\$3,641.00	N/A

<b>Total for all systems</b>	\$858,565.00	\$886,715.00	N/A	\$10,041.00	N/A
------------------------------	--------------	--------------	-----	-------------	-----

## Components

<b>Actual Information</b>	
<b>Description</b>	<b>File Name</b>
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 and or review reimbursement form	Information not provided.
Perform engineering study for new channel assignment and antenna development	<b>Component Description:</b> Engineering services <b>Amount:</b> \$1,750.00
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 Temporary Authorization	Information not provided.
Project management of the transition	<b>Component Description:</b> Project management services 5/26/18 through 6/29/18 <b>Amount:</b> \$300.00

<b>Component Description:</b>	Project management services 7/28/18 through 9/28/18.
<b>Amount:</b>	\$300.00

<b>Component Description:</b>	Project management services 3.2.19 through 3.29.19
<b>Amount:</b>	\$75.00

<b>Component Description:</b>	Project management services 10.27.18 through 12.31.18
<b>Amount:</b>	\$950.00

<b>Component Description:</b>	Project management services 1.1.19 through 1.31.19
<b>Amount:</b>	\$300.00

<b>Component Description:</b>	Project management services 2.1.19 through 3.1.19
<b>Amount:</b>	\$150.00

<b>Component Description:</b>	Project management services 8/29/17 through 12/31/17 and 1/27/18 through 4/27/18.
<b>Amount:</b>	\$1,491.00

**Component Description:**

Project  
management  
services 1/1/18  
through 1/26/18

**Amount:**

\$75.00

---



## Cost Information

### Other Expenses

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$82,080.00</b>	<b>\$75,515.00</b>		<b>\$0.00</b>	
MVPD Notification of Channel Change	<i>\$1,500.00</i>	\$1,500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$3,500.00</i>	\$3,500.00	Develop and produce crawls and spots for viewer notification.	N/A	N/A
Equipment Storage	<i>\$20,000.00</i>	\$20,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$25,000.00</i>	\$25,000.00	Removal costs per USA Commercial quote #8 attached	\$0.00	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
DTV Medical Facility Notification	\$11,550.00	\$5,000.00	N/A	N/A	N/A

Local Zoning	<b>\$20,000.00</b>	\$20,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$82,080.00	\$75,515.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$858,565.00	\$886,715.00	N/A	\$10,041.00	N/A

## Components

Actual Information	
Description	File Name
MVPD Notification of Channel Change	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.
Equipment Storage	Information not provided.
Disposal Costs (for equipment and other waste, net of any salvage value)	<b>Component Description:</b> Removal costs <b>Amount:</b> \$25,000.00
FCC Filing Fees - Special Temporary Authorization request	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	Information not provided.
DTV Medical Facility Notification	Information not provided.
Local Zoning	Information not provided.

<b>Cost Information</b>	<b>Grand Total</b>		
		<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>
			<b>Actual Cost</b>
	<b>Total for all systems</b>	\$858,565.00	\$886,715.00
			\$10,041.00

<b>Reimbursement Status</b>	<b>Question</b>	<b>Response</b>
	The facility has ceased operating on its pre-auction channel.	No
	Construction of final facilities or all necessary modifications are complete.	No
	All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator.	No

Certification	Section	Question	Response
	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"> <li>1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.</li> </ol>	

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

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.

**Elizabeth  
Ryder**  
*General  
Counsel*

06/03/2019

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	<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"> <li>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.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	

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><b>Elizabeth Ryder</b> <i>General Counsel</i></p> <p>06/03/2019</p>

## Attachments