



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **49439** | Service: **DTV** | Call **WNEO** | Channel: **29 (UHF)** |  
ID: | Sign:  
File **0000027699**  
Number:  
FRN: **0002940336** | Date **11/12**  
Submitted: **/2018**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>NORTHEASTERN EDUCATIONAL TELEVISION OF OHIO, INC.</b>	Anthony Dennis 1750 CAMPUS CENTER DRIVE P.O. BOX 5191 KENT, OH 44240 United States	+1 (330) 677- 4549	adennis@westernreservepublicmedia. org	Not-for- Profit

## 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
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<b>Robert Gehman</b> <i>ConsultingEngineer Kessler and Gehman Associates, Inc.</i>	Robert Gehman 507 NW 60 Street Suite D Gainesville, FL 32607 United States	+1 (352) 332-3157	bob@kesslerandgehman. com
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**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	Retune transmitter, replace antenna and line. Acquire interim transmitter, antenna and line for continued operation during construction and duration of the assigned phase. Map and analyze tower; design and implement modifications if required.

**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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	Thales
	Model	CTT-U-DCXP-2H
	Year	2003
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power capacity	40 kW

**Primary Transmitter**

**Retuning Transmitter Costs**

Section	Question	Response
<b>New IOT Tubes</b>	Number of Tubes (including accessories) needed	2
<b>New Mask Filter</b>	Power	60 kW
	Other Power	N/A
<b>New Exciter</b>	Is a new exciter needed?	Yes
	Exciter Type	Dual exciter with changeover

**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.

**Interim Transmitter**      **New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase
	Manufacturer	

Model	TBD
Transmitter Type	Solid State
Solid State Cooling	Liquid Cooled
Solid State Power capacity	31 kW
Justification for New Transmitter	To keep the station on the air while re-tuning the MSDC and for the duration of the assigned phase.

**Interim Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	Yes
	Size	3 inches
	Length	100.0 feet
	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
<b>Inside RF System</b>	Is an additional interior RF system required to support this interim transmitter?	Yes

**Interim 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) .....	500.0 kW



Manufacturer	
Model	TFU-42J
Year	2003

## Primary Antenna

### New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Top 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) .....	365.0 kW
	Manufacturer	
	Model	TBD
	Year	2018

Justification for New Antenna	The existing primary antenna is a single channel slotted coaxial which cannot accommodate the assigned channel.
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## 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	8 3/16 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?	No
	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	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) .....	500.0 kW
	Manufacturer	
	Model	TBD
	Year	2018

	Justification for New Antenna	An interim antenna is necessary to keep station on the air during primary antenna replacement and for the duration of the assigned phase. Station will attempt to rent if renting is available at time of acquisition.
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## 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?	Yes
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	Yes
<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
<b>Existing Transmission Line Description</b>	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
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	19 1/2 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	920 feet per run

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

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	7 3/16 inches
	Other Diameter	N/A
	Segment Length	19 1/2 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	920 feet per run
	Justification for New Transmission Line	Station is budgeting for new transmission line in case the sweep of the existing line is found to be unacceptable.

**Primary** **Other Transmission Line Expenses Not Listed**  
**Transmission Line**

Information not provided.

**Interim  
Transmission Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Flexible Air
	Diameter	5 inches
	Segment Length	N/A
	Other Segment Length	
	Number of parallel runs	1
	Length	820 feet per run
	Justification for New Transmission Line	An interim transmission line is necessary for the interim antenna to keep station on the air during primary antenna replacement and for the duration of the assigned phase. Station will attempt to rent if renting is available at time of acquisition.

Interim	Other Transmission Line Expenses Not Listed
Transmission Line	Information not provided.

**Tower Equipment And Rigging Costs**

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

**Primary Tower**

**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Is this tower consider Complex?	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?	No
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1021036
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	40° 54' 23.2" N-
	Longitude (NAD83)	080° 54' 39.3" W-
	Overall Structure Height	766.07 feet
	Support Structure Height	702.42 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1274.92 feet
	Structure Type	TOWER - Free Standing or Guyed Structure

	Tower Owner	NORTHEASTERN EDUCATIONAL TV OF OHIO INC
	Date Constructed	01/15/1990

**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:	Major 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	195
	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	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	No
	Additional Field Engineering Service	Yes



Number of Days	14
Justification	It will be necessary to survey the site, plan the equipment, develop specifications for purchasing, and oversee multiple vendor RF projects. Station does not have available personnel or personnel trained in such services.

**Outside Professional Services Costs**      **Other Professional Services Expenses Not Listed**

Services 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	No
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	No
	FCC Special Temporary Authority Application	No
<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?	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

<b>Other Expenses</b>	<b>Other Expenses Not Listed</b> Information not provided.
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## 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
Interim Transmitter TBD	\$1,163,450.00	\$1,105,500.00		\$0.00	
3" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$4,900.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$900,000.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	N/A	N/A
UHF inside RF system including switching	\$147,500.00	\$140,000.00	The UHF inside RF system is included in the online Cost Catalog and was pre-filled as a Predetermined Cost Estimate with a value of \$140,000.	N/A	N/A

<b>Primary Transmitter CTT-U-DCXP-2H</b>	<b>\$748,250.00</b>	<b>\$832,817.00</b>		<b>\$0.00</b>	
Dual exciter system with change over	\$47,350.00	\$45,245.00	See Comark quote attached, items 2.2. Also see letter from manufacturer justifying new exciters.	N/A	N/A
60 kW mask filter	\$89,400.00	\$85,000.00	N/A	N/A	N/A
2 IOT Tubes	\$255,000.00	\$242,000.00	See Comark quote attached, item 2.1	N/A	N/A
Two IOT system (40 kW)	\$356,500.00	\$460,572.00	See Comark quote attached, including services, materials and equipment \$435,000, plus delivery and offloading of transmitter system equipment items 2.3 and 2.4.	\$0.00	N/A
<b>Sub-total</b>	<b>\$1,911,700.00</b>	<b>\$1,938,317.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$3,676,000.00</b>	<b>\$3,640,248.00</b>	<b>N/A</b>	<b>\$14,590.50</b>	<b>N/A</b>

## 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
Interim Antenna TBD	\$215,140.00	\$213,400.00		\$0.00	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - High Power, Side Mount, basic slot antenna, 500 kW input, horizontally polarized	<i>\$180,000.00</i>	\$180,000.00	Cost Catalog shows a side-mount 200-500 kW, horizontally polarized antenna listed at \$125,000 - \$180,000. The 399 form does not offer the Predetermined value, so it was added manually from the Cost Catalog.	N/A	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$22,000.00	N/A	N/A	N/A

Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	N/A	N/A
<b>Primary Antenna TBD</b>	<b>\$268,980.00</b>	<b>\$266,611.00</b>		<b>\$0.00</b>	
UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized	\$247,000.00	\$235,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	See quote attached; item 4. to sweep new primary line and antenna.	N/A	N/A
Elbow complex, single channel, at antenna input, per 8 3/16. feedline (if needed)	\$15,250.00	\$25,211.00	See Dielectric quote attached	N/A	N/A
<b>Sub-total</b>	<b>\$484,120.00</b>	<b>\$480,011.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$3,676,000.00</b>	<b>\$3,640,248.00</b>	<b>N/A</b>	<b>\$14,590.50</b>	<b>N/A</b>

## 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	\$86,100.00	\$82,000.00		\$0.00	
Flexible Air Transmission Line - dielectric, 5"	\$86,100.00	\$82,000.00	N/A	N/A	N/A
Primary Transmission Line	\$266,800.00	\$253,920.00		\$0.00	
Rigid Transmission Line - copper, 7 3/16"	\$266,800.00	\$253,920.00	N/A	N/A	N/A
Sub-total	\$352,900.00	\$335,920.00	N/A	\$0.00	N/A
Total for all systems	\$3,676,000.00	\$3,640,248.00	N/A	\$14,590.50	N/A

Components

Information not provided.

Cost  
Information

Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower TOWER	\$657,800.00	\$625,000.00		\$0.00	
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	N/A	N/A
Major tower reinforcement /modifications	\$421,000.00	\$400,000.00	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	\$25,000.00	N/A	N/A	N/A
Sub-total	\$657,800.00	\$625,000.00	N/A	\$0.00	N/A
Total for all systems	\$3,676,000.00	\$3,640,248.00	N/A	\$14,590.50	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>\$177,930.00</b>	<b>\$170,000.00</b>		<b>\$14,590.50</b>	
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	\$0.00	Comprehensive coverage verification via field study WNEO. These are measurements to be used as a basis for comparison with the post-transition measurements. See the Consulting Engineer's WNEO KGA quote attached for reference.
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
Project management of the transition	\$30,810.00	\$29,250.00	N/A	N/A	N/A

Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$2,892.00	The Consulting Engineer prepared and amended the 399 for a lump sum fixed price and the Attorney also reviewed and certified the 399. See the Consulting Engineer's WNEO KGA quote attached for reference.
Address transition timing and coordination issues w/ other stations and wireless	\$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	\$7,000.00	Engineering study for new channel assignment and antenna development WNEO
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$3,000.00	Engineering section of Form FCC Construction Permit Application Main Facility WNEO. See the Consulting Engineer's WNEO KGA quote attached for reference.

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
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$1,173.50	Attorney section of Form FCC Construction Permit Application Main Facility WNEO
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	\$3,680.00	\$3,500.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Additional Field Engineering Service, 14 Days	\$28,000.00	\$28,000.00	N/A	\$525.00	Additional Field Engineering Service WNEO
<b>Sub-total</b>	\$177,930.00	\$170,000.00	N/A	\$14,590.50	N/A

<b>Total for all systems</b>	\$3,676,000.00	\$3,640,248.00	N/A	\$14,590.50	N/A
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## Components

Actual Information	
Description	File Name
Comprehensive coverage verification via field study, if needed	<b>Component Description:</b>
	Comprehensive Coverage Verification, Field Strength Measurements WNEO
	<b>Amount:</b>
	\$31,718.50
	<b>Component Description:</b>
	Comprehensive coverage verification via field study WNEO
	<b>Amount:</b>
	\$31,718.50
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.
Project management of the transition	Information not provided.

<p>Prepare and or review reimbursement form</p>	<table> <tr> <td data-bbox="703 174 1011 208"><b>Component Description:</b></td><td data-bbox="1145 174 1362 365">Prepare or Review FCC Form 399 for Reimbursement WNEO Attorney Review</td></tr> <tr> <td data-bbox="703 376 815 409"><b>Amount:</b></td><td data-bbox="1145 376 1241 409">\$392.00</td></tr> <tr> <td data-bbox="703 517 1011 551"><b>Component Description:</b></td><td data-bbox="1145 517 1362 663">Prepare or Review FCC Form 399 for Reimbursement WNEO</td></tr> <tr> <td data-bbox="703 674 815 707"><b>Amount:</b></td><td data-bbox="1145 674 1262 707">\$2,500.00</td></tr> </table>	<b>Component Description:</b>	Prepare or Review FCC Form 399 for Reimbursement WNEO Attorney Review	<b>Amount:</b>	\$392.00	<b>Component Description:</b>	Prepare or Review FCC Form 399 for Reimbursement WNEO	<b>Amount:</b>	\$2,500.00
<b>Component Description:</b>	Prepare or Review FCC Form 399 for Reimbursement WNEO Attorney Review								
<b>Amount:</b>	\$392.00								
<b>Component Description:</b>	Prepare or Review FCC Form 399 for Reimbursement WNEO								
<b>Amount:</b>	\$2,500.00								
<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<p>Information not provided.</p>								
<p>Perform engineering study for new channel assignment and antenna development</p>	<table> <tr> <td data-bbox="703 996 1011 1030"><b>Component Description:</b></td><td data-bbox="1145 996 1385 1164">Engineering study for new channel assignment and antenna development WNEO</td></tr> <tr> <td data-bbox="703 1198 815 1232"><b>Amount:</b></td><td data-bbox="1145 1198 1262 1232">\$7,000.00</td></tr> </table>	<b>Component Description:</b>	Engineering study for new channel assignment and antenna development WNEO	<b>Amount:</b>	\$7,000.00				
<b>Component Description:</b>	Engineering study for new channel assignment and antenna development WNEO								
<b>Amount:</b>	\$7,000.00								
<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="703 1366 1011 1400"><b>Component Description:</b></td><td data-bbox="1145 1366 1378 1635">Engineering section of Form FCC Construction Permit Application Main Facility WNEO. See KGA Quote attached.</td></tr> <tr> <td data-bbox="703 1646 815 1680"><b>Amount:</b></td><td data-bbox="1145 1646 1262 1680">\$3,000.00</td></tr> </table>	<b>Component Description:</b>	Engineering section of Form FCC Construction Permit Application Main Facility WNEO. See KGA Quote attached.	<b>Amount:</b>	\$3,000.00				
<b>Component Description:</b>	Engineering section of Form FCC Construction Permit Application Main Facility WNEO. See KGA Quote attached.								
<b>Amount:</b>	\$3,000.00								
<p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>								
<p>Prepare request for Special Temporary Authorization</p>	<p>Information not provided.</p>								

<p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="697 100 1114 369"> <p><b>Component Description:</b></p> </td><td data-bbox="1114 100 1428 369"> <p>Attorney section of Form FCC Construction Permit Application Main Facility WNEO</p> </td></tr> <tr> <td data-bbox="697 369 1114 481"> <p><b>Amount:</b></p> </td><td data-bbox="1114 369 1428 481"> <p>\$933.00</p> </td></tr> <tr> <td data-bbox="697 481 1114 750"> <p><b>Component Description:</b></p> </td><td data-bbox="1114 481 1428 750"> <p>Attorney section of Form FCC Construction Permit Application Main Facility WNEO</p> </td></tr> <tr> <td data-bbox="697 750 1114 862"> <p><b>Amount:</b></p> </td><td data-bbox="1114 750 1428 862"> <p>\$106.50</p> </td></tr> <tr> <td data-bbox="697 862 1114 1142"> <p><b>Component Description:</b></p> </td><td data-bbox="1114 862 1428 1142"> <p>Attorney section of Form FCC Construction Permit Application Main Facility WNEO</p> </td></tr> <tr> <td data-bbox="697 1142 1114 1254"> <p><b>Amount:</b></p> </td><td data-bbox="1114 1142 1428 1254"> <p>\$134.00</p> </td></tr> </table>	<p><b>Component Description:</b></p>	<p>Attorney section of Form FCC Construction Permit Application Main Facility WNEO</p>	<p><b>Amount:</b></p>	<p>\$933.00</p>	<p><b>Component Description:</b></p>	<p>Attorney section of Form FCC Construction Permit Application Main Facility WNEO</p>	<p><b>Amount:</b></p>	<p>\$106.50</p>	<p><b>Component Description:</b></p>	<p>Attorney section of Form FCC Construction Permit Application Main Facility WNEO</p>	<p><b>Amount:</b></p>	<p>\$134.00</p>
<p><b>Component Description:</b></p>	<p>Attorney section of Form FCC Construction Permit Application Main Facility WNEO</p>												
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<p>Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>												
<p>Attorney Fees - Prepare and File request for Special Temporary Authorization</p>	<p>Information not provided.</p>												
<p>ASR modification (prepare FCC Form 854)</p>	<p>Information not provided.</p>												



Additional Field  
Engineering Service, 14  
Days

**Component Description:**

Additional Field  
Engineering  
Service WNEO Site  
Prep

**Amount:**

\$225.00

**Component Description:**

WNEO - Additional  
Field Engineering  
Service - Budget  
meeting and RF  
Inventory

**Amount:**

\$300.00

**Component Description:**

Additional Field  
Engineering  
Service WNEO Site  
Prep

**Amount:**

\$300.00

**Component Description:**

Credit Memo  
requested by FCC  
for WNEO

**Amount:**

(\$300.00)

## 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>\$91,550.00</b>	<b>\$91,000.00</b>		<b>\$0.00</b>	
MVPD Notification of Channel Change	<i>\$2,000.00</i>	\$2,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$0.00</i>	\$0.00	N/A	N/A	N/A
Equipment Storage	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$25,000.00</i>	\$25,000.00	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	N/A	N/A	N/A
Non-zoning permits	<i>\$3,000.00</i>	\$3,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$91,550.00	\$91,000.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$3,676,000.00	\$3,640,248.00	N/A	\$14,590.50	N/A

## Components

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>	\$3,676,000.00	\$3,640,248.00
			\$14,590.50

<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.

<p>8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Robert Gehman</b>  <i>Consulting Engineer</i></p> <p>11/12/2018</p>

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).	
		<ol style="list-style-type: none"> <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>Robert Gehman</b>  <i>Consulting Engineer</i></p> <p>11/12/2018</p>

## Attachments