



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **41314** | Service: **DTV** | Call **WINP-TV** | Channel: **16 (UHF)** |
ID: | Sign:
File **0000028642**
Number:
FRN: **0001808468** | Date **12/12**
Submitted: **/2018**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
ION MEDIA OF SCRANTON, INC.	Bianca Frye 601	+1 (561)	BiancaFrye@ionmedia.com	Corporation
Doing Business As: ION MEDIA OF SCRANTON, INC.	Clearwater Park Road West Palm Beach, FL 33401 United States	682- 4110		

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
The Preparer is same as the reimbursement contact.			

Broadcaster Information and Transition Plan

Question	Response
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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.	Yes
Briefly describe transition plan	Install and operate from interim antenna on pre repack channel utilizing current non retunable transmitter. Replace current top mount antenna, transmission line and transmitter for operation on post repack channel.

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	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	HP50SDW
	Year	2004
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	40 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?	Yes
	Manufacturer	
	Model	HPTV-PRLX-U32
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	55 kW
	Justification for New Transmitter	Axcera has gone out of business. This manufacturer's IOT transmitter cannot be re-tuned and is no longer supported. See attached Transmitter Upgrade Disclaimer.

**Primary
Transmitter**

Other Transmitter Costs

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

	Size	N/A
	Length	N/A
	Other Electrical Service	Yes
	Description	Electrical Installation for replacement transmitter
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Type	Cooling Only
	Size	5 tons
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other 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**

Name	Description
RF Interconnect	Interconnect between RF system and transmission line
Removal of Existing Equipment	Removal of existing transmitters and equipment / Site Prep

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	Top
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	1
	Number of Panels	32
	Design power capacity in use	50.0 %
	Lower Limit	614.00 MHz
	Upper Limit	620.00 MHz
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	500.0 kW

Manufacturer	
Model	TCI-888-32
Year	2004

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?	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	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)	775.0 kW
	Manufacturer	

Model	ATW26H3-ETO-16H
Year	2018
Justification for New Antenna	Current antenna is no longer supported by manufacturer, see attached exhibit.

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?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	6 1/8 inches inches
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
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**Primary
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	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	19 3/4 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	600 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	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	19 3/4 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	625 feet per run
	Justification for New Transmission Line	See attached Transmission Line Exhibit

Primary
Transmission Line

Other Transmission Line Expenses Not Listed

Name	Description
Sweep existing transmission line	Sweep existing transmission line

**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?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	Unknown
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1022324
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	40° 26' 46.0" N-
	Longitude (NAD83)	079° 57' 50.0" W-
	Overall Structure Height	569.87 feet
	Support Structure Height	517.71 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1164.68 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	WQED MULTIMEDIA
	Date Constructed	08/01/1972

**FM, AM or TV radio
broadcasters. Facility ID's,
Call Signs and Services of
other broadcast stations with
whom the tower is shared**

Facility ID	Call Sign	Service
66636	WOSC-CD	DTV
7622	WNNB-CD	DTV
68405	WEPA-CD	DTV
68395	WBYD-CD	DTV
65681	WTAE-TV	DTV
54002	WQED-FM	FM
272	WPTG-CD	DTV
41315	WQED	DTV

**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
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**Primary
Tower**

Tower Rigging Costs

Section	Question	Response
Tower Rigging Costs	Complex Tower	N/A
Helicopter Services Required	Are helicopter services required?	Yes

**Primary
Tower**

Other Tower Expenses Not Listed

Name	Description
Structural Study	Structural analysis required after tower mapping completed

**Outside
Professional**

Section	Question	Response
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	Yes
	Quantity	1
	Do you have Distributed Transmission System engineering services?	N/A
	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	Yes
	Quantity	1
	NEPA Section 106 environmental review	Yes
	Environmental Assessment	Yes
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	Negotiation of Lease and other Matter for Shared Locations	Yes
	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 Professional Services Costs **Other Professional Services Expenses Not Listed**
 If none are provided, write "None".

**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	Yes
	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.
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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
Primary Transmitter HPTV-PRLX-U32	\$2,567,250.00	\$1,507,808.00		\$381,888.00	
UHF - Liquid Cooled Solid State Transmitter 52 - 61 kW	\$1,788,000.00	\$1,031,670.00	See attached Baseline - Hitachi Comark Quote #P3470PRLXU12-011818-R1 for baseline transmitter cost. See Upgrade - Hitachi Comark Quote #P3470PRLXU32-WINP-101118-R7 for incremental cost to increase transmitter TPO.	N/A	N/A
RF Interconnect	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Other Electrical Service: Electrical Installation for replacement transmitter	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
5 Ton system	\$20,250.00	\$19,250.00	N/A	N/A	N/A

UHF - Liquid Cooled Solid State Transmitter 14.2 - 20 kW	\$684,000.00	\$381,888.00	***System Notice: Estimate adjusted and locked because line has been superseded. ***see attached Hitachi Comark Quote #P3470PRLXU12- 011818-R1.	\$381,888.00	N/A
Removal of Existing Equipment	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Sub-total	\$2,567,250.00	\$1,507,808.00	N/A	\$381,888.00	N/A
Total for all systems	\$3,711,420.00	\$2,499,070.85	N/A	\$567,542.41	N/A

Components

Actual Information	
Description	File Name
UHF - Liquid Cooled Solid State Transmitter 52 - 61 kW	Information not provided.
RF Interconnect	Information not provided.
Other Electrical Service: Electrical Installation for replacement transmitter	Information not provided.
5 Ton system	Information not provided.

UHF - Liquid Cooled Solid State Transmitter 14.2 - 20 kW	Component Description: 30% "deposit" payment for Comark Transmitter. Supporting documentation attached. Amount: \$143,208.00 Component Description: 50% "progress" payment on Comark transmitter. Supporting documentation attached. Amount: \$238,680.00
Removal of Existing Equipment	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 ATW26H3-ETO-16H	\$308,530.00	\$212,809.75		\$106,404.87	
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$10,348.75	See attached Electronics Research, Inc. Quote #20181017-596 Rev A.	\$5,174.37	N/A
Sweep test of existing antenna	\$6,730.00	\$6,250.00	See attached Electronics Research, Inc. Quote #20181017-596 Rev A.	\$3,125.00	N/A
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$196,211.00	See attached Electronics Research, Inc. Quote #20181017-596 Rev A. Elliptical Polarization is excluded from this estimate.	\$98,105.50	N/A
Sub-total	\$308,530.00	\$212,809.75	N/A	\$106,404.87	N/A
Total for all systems	\$3,711,420.00	\$2,499,070.85	N/A	\$567,542.41	N/A

Components

Actual Information	
Description	File Name
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	Component Description:
	15% "deposit" payment for primary elbow complex. Explanation of variance form and supporting documentation attached. This invoice has been paid.
	Amount:
	\$1,552.31
	Component Description:
	35% "progress payment" for primary elbow complex. Explanation of variance form and supporting documentation attached. This invoice has been paid.
	Amount:
	\$3,622.06

Sweep test of existing antenna	Component Description: 15% "deposit" payment for repack sweep of primary antenna operations. Explanation of variance form and supporting documentation attached. This invoice has been paid. Amount: \$937.50 Component Description: 35% "progress payment" for repack sweep of primary antenna operations. Explanation of variance form and supporting documentation attached. This invoice has been paid. Amount: \$2,187.50
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UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	Component Description:	35% "progress payment" for primary antenna. Explanation of variance form and supporting documentation attached. This invoice has been paid.
	Amount:	\$68,673.85
	Component Description:	15% "deposit" payment for primary antenna. Explanation of variance form and supporting documentation attached. This invoice has been paid.
	Amount:	\$29,431.65

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	\$132,650.00	\$111,788.10		\$52,694.05	
Rigid Transmission Line - copper, 6 1/8"	\$126,250.00	\$105,388.10	See attached Electronics Research, Inc. Quote #20181017-596 Rev A.	\$52,694.05	N/A
Sweep existing transmission line	\$6,400.00	\$6,400.00	N/A	N/A	N/A
Sub-total	\$132,650.00	\$111,788.10	N/A	\$52,694.05	N/A
Total for all systems	\$3,711,420.00	\$2,499,070.85	N/A	\$567,542.41	N/A

Components

Actual Information Description	File Name
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Rigid Transmission Line - copper, 6 1/8"	Component Description: 15% "deposit" payment for primary transmission line. Explanation of variance form and supporting documentation attached. This invoice has been paid. Amount: \$15,808.22 Component Description: 35% "progress payment" for primary transmission line. Explanation of variance form an supporting documentation attached. This invoice has been paid. Amount: \$36,885.83
Sweep existing transmission line	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	\$453,300.00	\$433,500.00		\$20,000.00	
Structural Study	<i>\$12,000.00</i>	\$12,000.00	See Shared Equipment Exhibit for more information.	\$0.00	N/A
Tower Helicopter Lift	<i>\$46,500.00</i>	\$46,500.00	See Shared Equipment Exhibit and Helicopter Quote for more information.	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	See Shared Equipment Exhibit for more information.	\$20,000.00	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	See Shared Equipment Exhibit for more information.	N/A	N/A

Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Sub-total	\$453,300.00	\$433,500.00	N/A	\$20,000.00	N/A
Total for all systems	\$3,711,420.00	\$2,499,070.85	N/A	\$567,542.41	N/A

Components

Actual Information	
Description	File Name
Structural Study	Information not provided.
Tower Helicopter Lift	Information not provided.
Tall Tower (greater than 500')	Component Description: Down payment associated with securing tower service. Note that amount is not additional to cost of tower rigging and will be deducted from total cost of tower rigging at the time it is quoted. Supporting documentation attached. This invoice has been paid. Amount: \$20,000.00
Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study	Information not provided.
Minor tower reinforcement /modifications	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
Outside Professional Services	\$161,210.00	\$152,750.00		\$6,555.49	
RF Exposure Measurements	\$21,050.00	\$20,000.00	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
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
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	\$10,520.00	\$10,000.00	N/A	N/A	N/A
NEPA Section 106 environmental review, if needed	\$6,310.00	\$6,000.00	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
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	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	\$4,742.99	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$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	\$1,750.00	N/A

Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$62.50	N/A
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
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Sub-total	\$161,210.00	\$152,750.00	N/A	\$6,555.49	N/A
Total for all systems	\$3,711,420.00	\$2,499,070.85	N/A	\$567,542.41	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.

FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	Information not provided.
NEPA Section 106 environmental review, if needed	Information not provided.
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees - Negotiation of lease and other matters for shared locations	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	<table> <tr> <td data-bbox="703 100 1141 795"> Component Description: </td><td data-bbox="1141 100 1428 795"> Invoice for WINP's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff. Hourly supporting documentation and invoice attached. </td></tr> <tr> <td data-bbox="703 795 1141 840"> Amount: </td><td data-bbox="1141 795 1428 840"> \$4,742.99 </td></tr> <tr> <td data-bbox="703 840 1141 1480"> Component Description: </td><td data-bbox="1141 840 1428 1480"> Invoice for station's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff and has provided corrected supporting documentation. </td></tr> <tr> <td data-bbox="703 1480 1141 1525"> Amount: </td><td data-bbox="1141 1480 1428 1525"> \$4,837.97 </td></tr> </table>	Component Description:	Invoice for WINP's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff. Hourly supporting documentation and invoice attached.	Amount:	\$4,742.99	Component Description:	Invoice for station's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff and has provided corrected supporting documentation.	Amount:	\$4,837.97
Component Description:	Invoice for WINP's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff. Hourly supporting documentation and invoice attached.								
Amount:	\$4,742.99								
Component Description:	Invoice for station's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff and has provided corrected supporting documentation.								
Amount:	\$4,837.97								
Prepare request for Special Temporary Authorization	Information not provided.								

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<table> <tr> <td data-bbox="710 174 1013 212">Component Description:</td><td data-bbox="1150 174 1369 607">Cost of RF consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid.</td></tr> <tr> <td data-bbox="710 618 817 656">Amount:</td><td data-bbox="1150 618 1267 656">\$1,500.00</td></tr> <tr> <td data-bbox="710 757 1013 795">Component Description:</td><td data-bbox="1150 757 1369 1189">Cost of RF consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid.</td></tr> <tr> <td data-bbox="710 1200 817 1238">Amount:</td><td data-bbox="1150 1200 1246 1238">\$250.00</td></tr> </table>	Component Description:	Cost of RF consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid.	Amount:	\$1,500.00	Component Description:	Cost of RF consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid.	Amount:	\$250.00
Component Description:	Cost of RF consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid.								
Amount:	\$1,500.00								
Component Description:	Cost of RF consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid.								
Amount:	\$250.00								
Perform engineering study for new channel assignment and antenna development	<table> <tr> <td data-bbox="710 1361 1013 1400">Component Description:</td><td data-bbox="1150 1361 1369 1794">Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.</td></tr> <tr> <td data-bbox="710 1805 817 1843">Amount:</td><td data-bbox="1150 1805 1230 1843">\$62.50</td></tr> </table>	Component Description:	Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.	Amount:	\$62.50				
Component Description:	Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.								
Amount:	\$62.50								
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.								

Prepare and or review reimbursement form	Information not provided.
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
ASR modification (prepare FCC Form 854)	Information not provided.

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	\$88,480.00	\$80,415.00		\$0.00	
MVPD Notification of Channel Change	<i>\$1,400.00</i>	\$1,400.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$0.00</i>	\$0.00	The amount is yet to be determined (TBD) and ION will submit on-air announcement costs when finalized.	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$3,500.00	N/A	N/A	N/A
Equipment Storage	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A

FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
Local Zoning	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Non-zoning permits	\$15,000.00	\$15,000.00	N/A	N/A	N/A
Sub-total	\$88,480.00	\$80,415.00	N/A	\$0.00	N/A
Total for all systems	\$3,711,420.00	\$2,499,070.85	N/A	\$567,542.41	N/A

Components

Information not provided.

Cost Information	Grand Total			
		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$3,711,420.00	\$2,499,070.85	\$567,542.41

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
	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.	
		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.	Mario Vasquez <i>Vice President - Finance, Operations</i> 12/12/2018

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 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).	
		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.	Mario Vasquez <i>Vice President - Finance, Operations</i> 12/12/2018

Attachments