



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **168014** | Service: **DCA** | Call **W15EA-D** | Channel: **15 (UHF)**
ID: | Sign:
File **0000025765**
Number:
FRN: **0026907345** | Date **03/26**
Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
HC2 STATION GROUP, INC.	RENEE ILHARDT 450 PARK AVENUE 30TH FLOOR NEW YORK, NY 10022 United States	+1 (646) 431-8489	RILHARDT@HC2BROADCASTING.COM	Corporation

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
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	Perform structural analysis and tower modifications if needed. Tower expenses will be shared with other tenant WBUY (FAC ID 60830) but exact arrangement are TBD. Replace antenna and transmitter.

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	DTU2KU-50
	Year	2010
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	2 kW

**Primary
Transmitter**

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	3kw
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	2.5 kW
	Justification for New Transmitter	Transmitter is in working condition. Please see details in attachment "W50EA-D transmitter justification".

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	50.0 feet

	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

**Primary
Transmitter**

Other Transmitter Cost Not Listed

Information not provided.

Antennas

Section	Question	Response
Antenna Related Expenses	Do you have antenna related expenses?	Yes

**Primary
Antenna**

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna Manufacturer and Type	Class	Class A
	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)	15.0 kW

Manufacturer	
Model	JA/SS-Omni
Year	2010

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	Class A
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Broadband Slot
	Number of Stations Supported	1
	Number of Panels/Bays	12
	Lower Limit	470.00 MHz
	Upper Limit	862.00 MHz
	Design power capacity in use	75.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	AL12OC-15

	Year	2018
	Justification for New Antenna	Existing coaxial slot antenna will not function on repacked channel.

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	Do you require the sweep testing of transmission line and antenna?	No

Primary
Antenna

Other Antenna Cost Not Listed

Name	Description
Freight	Freight costs

Transmission Line

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

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?	Candelabra
	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?	Yes
Existing Tower Structure Registration	Is tower compliant with Rev G?	Yes
	Do you have a tower registration number?	Yes
Coordinates (NAD83 (North American Datum of 1983))	ASR Number	1057943
	Latitude (NAD83)	35° 16' 33.0" N-
	Longitude (NAD83)	089° 46' 38.0" W-

Overall Structure Height	1198.80 feet
Support Structure Height	1195.85 feet
Ground Elevation Above Mean Sea Level (AMSL)	250.00 feet
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Vertical Bridge Towers, LLC
Date Constructed	05/16/1999

**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
68518	WLMT	DTV
60830	WBUY-TV	DTV
58397	WEGR	FM
11907	WATN-TV	DTV

Primary Tower

Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for tower with candelabra
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	Candelabra
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
Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	400
	Explanation	Outside consulting engineering, legal work, and accounting services, as well as project management for regional and comprehensive repack execution.
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	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	No
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Other Professional Services Expenses Not Listed
Professional Services Costs Services not provided.

**Other
Expenses**

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Facility Expenses	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
Permit and Filing Costs	Local Zoning	Yes
	Non-zoning permits	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	Yes
	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)?	No
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
	Does this relocation require Equipment Storage?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	No

Other Expenses	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 3kw	\$165,500.00	\$158,400.00		\$80,060.12	
Switchgear - industrial 800 amp	\$38,200.00	\$37,150.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$120,000.00	N/A	\$80,060.12	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$1,300.00	\$1,250.00	N/A	N/A	N/A
Sub-total	\$165,500.00	\$158,400.00	N/A	\$80,060.12	N/A
Total for all systems	\$897,563.00	\$799,528.00	N/A	\$108,456.65	N/A

Components

Actual Information	
Description	File Name
Switchgear - industrial 800 amp	Information not provided.

UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	Component Description:	Transmitter related cost. #2018005
	Amount:	\$2,924.30
	Component Description:	Transmitter related cost. #20170034
	Amount:	\$1,201.25
	Component Description:	Transmitter cost, upgrade excluded. #3658
	Amount:	\$75,934.57
	Component Description:	Installation and travel expense. #20170034
	Amount:	\$2,001.25
	Component Description:	FCC Channel Repack
	Amount:	\$80,118.80
	Component Description:	Transmitter related costs. #3658
	Amount:	\$80,118.80
	Component Description:	Installation of transmitter and traveling expenses
	Amount:	\$2,162.50
2" Rigid Conduit and Wiring (Cost per foot)	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 AL12OC-15	\$27,093.00	\$25,793.00		\$19,966.18	
Freight	<i>\$793.00</i>	\$793.00	Updating estimated cost per FCC requirement.	\$0.00	Second item "Need More Information - \$591.18" should be removed.
UHF - Lower Power Side Mount, Class A One Station antenna -- basic	\$26,300.00	\$25,000.00	N/A	\$19,966.18	The two items - Need More Information #50753 & #W50EA-D-001 - should be removed.
Sub-total	\$27,093.00	\$25,793.00	N/A	\$19,966.18	N/A
Total for all systems	\$897,563.00	\$799,528.00	N/A	\$108,456.65	N/A

Components

Actual Information	
Description	File Name

Freight	Component Description:	Freight cost for antenna. #3684
	Amount:	\$793.00
	Component Description:	Freight costs
	Amount:	\$591.18
UHF - Lower Power Side Mount, Class A One Station antenna -- basic	Component Description:	Antenna replacement related cost. Downpayment upon acceptance of the agreement. #1924
	Amount:	\$3,000.00
	Component Description:	50% downpayment, upgrade excluded. #W50EA-D-001
	Amount:	\$5,437.50
	Component Description:	Balance due for antenna related cost. #50753
	Amount:	\$6,706.30
	Component Description:	Antenna replacement related cost. #1924
	Amount:	\$3,000.00
	Component Description:	Antenna replacement related cost. #1961
	Amount:	\$5,500.00

Component Description:	50% down payment for antenna equipment. #W50EA-D-001
Amount:	\$6,115.13

Component Description:	50% balance, upgrade excluded. #50753
Amount:	\$6,028.68

Component Description:	Existing antenna is not designed to operate on the post repack channel. Licensee has included pricing information for equivalent horizontally polarized antenna in addition to elliptically polarized antenna actually purchased.
Amount:	\$9,750.00

Component Description:	Balance of the agreement. Antenna replacement related cost. #1961
Amount:	\$5,500.00

Cost Information **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	\$599,000.00	\$569,000.00		\$3,250.00	
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$400,000.00	N/A	\$0.00	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	\$0.00	N/A
Structural engineering tower load study for a documented tower with candelabra	\$20,000.00	\$19,000.00	N/A	\$3,250.00	The third item should be removed.
Sub-total	\$599,000.00	\$569,000.00	N/A	\$3,250.00	N/A
Total for all systems	\$897,563.00	\$799,528.00	N/A	\$108,456.65	N/A

Components

Actual Information	
Description	File Name

Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	<div> Component Description: Coast to Coast Tower Services </div> <div> Amount: \$8,500.00 </div>
Minor tower reinforcement /modifications	Information not provided.
Structural engineering tower load study for a documented tower with candelabra	<div> Component Description: Structural analysis. #INV-000135856 </div> <div> Amount: \$3,250.00 </div>
	<div> Component Description: Structural engineering tower load study. #INV-000135856 </div> <div> Amount: \$3,250.00 </div>
	<div> Component Description: Vertical Bridge Invoice INV-000135856 replaces Vertical Bridge PO for Structural Analysis </div> <div> Amount: \$3,250.00 </div>

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	\$91,280.00	\$32,250.00		\$3,402.58	
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$580.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$320.00	N/A
Project management of the transition	\$63,200.00	\$6,000.00	N/A	\$1,881.13	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$621.45	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
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	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 request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Sub-total	\$91,280.00	\$32,250.00	N/A	\$3,402.58	N/A
Total for all systems	\$897,563.00	\$799,528.00	N/A	\$108,456.65	N/A

Components

Actual Information

Description	File Name
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Prepare and or review
reimbursement form

Component Description: Prepare and review
reimbursement
form. #201757
Amount: \$180.00

Component Description: Review
reimbursement
form. #20170034
Amount: \$400.00

Component Description: FCC 399
preparation.
#201757
Amount: \$180.00

Component Description: Form 399
preparation.
#20170034
Amount: \$400.00

Component Description: FCC 399 Update
Preparation of CP
Amount: \$240.00

Component Description: FCC 399 update
Amount: \$400.00

Perform engineering study for new channel assignment and antenna development	<table> <tr> <td data-bbox="702 174 1018 210">Component Description:</td><td data-bbox="1145 174 1292 286">Engineering services. #20170034</td></tr> <tr> <td data-bbox="702 297 817 333">Amount:</td><td data-bbox="1145 297 1248 333">\$320.00</td></tr> <tr> <td data-bbox="702 434 1018 470">Component Description:</td><td data-bbox="1145 434 1292 546">Engineering services. #20170034</td></tr> <tr> <td data-bbox="702 557 817 593">Amount:</td><td data-bbox="1145 557 1248 593">\$320.00</td></tr> <tr> <td data-bbox="702 694 1018 730">Component Description:</td><td data-bbox="1145 694 1362 766">Engineering study</td></tr> <tr> <td data-bbox="702 732 817 768">Amount:</td><td data-bbox="1145 732 1248 768">\$320.00</td></tr> </table>	Component Description:	Engineering services. #20170034	Amount:	\$320.00	Component Description:	Engineering services. #20170034	Amount:	\$320.00	Component Description:	Engineering study	Amount:	\$320.00
Component Description:	Engineering services. #20170034												
Amount:	\$320.00												
Component Description:	Engineering services. #20170034												
Amount:	\$320.00												
Component Description:	Engineering study												
Amount:	\$320.00												
Project management of the transition	<table> <tr> <td data-bbox="702 904 1018 940">Component Description:</td><td data-bbox="1145 904 1369 1137">Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1112</td></tr> <tr> <td data-bbox="702 1149 817 1184">Amount:</td><td data-bbox="1145 1149 1248 1184">\$521.40</td></tr> <tr> <td data-bbox="702 1285 1018 1321">Component Description:</td><td data-bbox="1145 1285 1369 1518">Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1104</td></tr> <tr> <td data-bbox="702 1529 817 1565">Amount:</td><td data-bbox="1145 1529 1248 1565">\$644.80</td></tr> <tr> <td data-bbox="702 1666 1018 1702">Component Description:</td><td data-bbox="1145 1666 1369 1899">Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1096</td></tr> <tr> <td data-bbox="702 1910 817 1946">Amount:</td><td data-bbox="1145 1910 1248 1946">\$714.93</td></tr> </table>	Component Description:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1112	Amount:	\$521.40	Component Description:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1104	Amount:	\$644.80	Component Description:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1096	Amount:	\$714.93
Component Description:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1112												
Amount:	\$521.40												
Component Description:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1104												
Amount:	\$644.80												
Component Description:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1096												
Amount:	\$714.93												

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	CP application. #201757 \$60.00
	Component Description: Amount:	CP preparation. #201757 \$60.00
	Component Description: Amount:	CP preparation \$262.50
	Component Description: Amount:	Engineering review \$233.33
	Component Description: Amount:	Form 399 filing \$65.62
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare request for Special Temporary Authorization	Information not provided.	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Attorney Fees - Prepare and File request for Special Temporary Authorization	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	\$14,690.00	\$14,085.00		\$1,777.77	
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	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	<i>\$500.00</i>	\$500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$1,000.00</i>	\$1,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	<i>\$1,777.77</i>	N/A
Sub-total	\$14,690.00	\$14,085.00	N/A	\$1,777.77	N/A
Total for all systems	\$897,563.00	\$799,528.00	N/A	\$108,456.65	N/A

Components

Actual Information	
Description	File Name
FCC Filing Fees - Form 2100 license to cover application	Information not provided.
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.
FCC Filing Fees - Special Temporary Authorization request	Information not provided.
Local Zoning	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.
DTV Medical Facility Notification	<div> <div>Component Description:</div> <div>Medical notification service. #INV-001869</div> </div> <div> <div>Amount:</div> <div>\$1,777.77</div> </div>

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$897,563.00	\$799,528.00
			\$108,456.65

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

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

<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>Les Levi <i>Chief Operating Officer</i></p> <p>03/26/2019</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"> 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.

<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>Les Levi <i>Chief Operating Officer</i></p> <p>03/26/2019</p>

Attachments