Approved by OMB (Office of Management and Budget) 3060-1178

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility ID: **18741** | Service: **DCA** | Call Sign: **KVMM-CD** | Channel: **28 (UHF)**

File Number: **0000028399**

FRN: **0026907345** | Date Submitted: **02/07/2019**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
KVMM LLC Doing Business As: KVMM LLC	Keith Murphy 1275 Pennsylvania Avenue NW Suite 710 WASHINGTON, DC 20004 United States	+1 (202) 785-7300	Keith.Murphy@viacom.com	Limited Liability Company

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
Erin Kim *Attorney* *Lerman Senter PLLC*	Erin Kim 2001 L Street NW, Suite 400 Washington, DC 20036 United States	+1 (202) 416-6772	ekim@lermansenter.com

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	KVMM-CD consists of a transmitter feeding a transmission line that extends to the antenna. The antenna is mounted on a short 8-m pole. The antenna and transmitter will be replaced with new units for operation on the reassigned channel.

Transmitters

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

Primary Transmitter

Add 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	SDT-502 UB
	Year	2007
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	1.4 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	EC702HP-BB
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1.7 kW
	Justification for New Transmitter	The current transmitter cannot operate on Channel 28. The mask filter is internal and is impractical to replace for Channel 28.

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	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 leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

Primary Transmitter

Other Transmitter Cost Not Listed

Name	Description
Other Costs: Heating and Cooling	Costs associated with Heating and Cooling of the transmitter

Antennas

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

Primary Antenna

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna Manufacturer and Type	Class	Class A
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	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	PSILP8BB-41-CP
Year	2007

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?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna Manufacturer and Types	Class	Class A
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	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)	11.5 kW
	Manufacturer	

Model	PSILP8BB-28-CP
Year	2020
Justification for New Antenna	Existing will not function on new 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?	Yes

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?	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?	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?	No
	ASR Number	
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	34° 27' 56.9" N-
	Longitude (NAD83)	119° 40' 41.4" W-

Overall Structure Height	26.00 feet
Support Structure Height	26.00 feet
Ground Elevation Above Mean Sea Level (AMSL)	2100.00 feet
Structure Type	POLE - Any type of Pole
Tower Owner	Jonathan Franklin
Date Constructed	01/01/1972

Primary Tower

Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	No study needed
Tower Reinforcements	Please select whether tower reinforcements are needed:	No 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
Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	200
	Explanation	The station's attorney and others will manage reimbursement filings, complete progress reports and engineering applications, and engage in any additional coordination that is needed for KVMM-CD to accomplish the repack transition over the 3 year period.
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	Yes
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 Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Other Costs	Expenses associated with legal work

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

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 EC702HP-BB	**$131,000.00**	**$125,000.00**		**$89,938.82**	
Other Costs: Heating and Cooling	***$5,000.00***	$5,000.00	Cost of Crocker Invoice	$4,933.82	N/A
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	$126,000.00	$120,000.00	N/A	$85,005.00	N/A
Sub-total	$131,000.00	$125,000.00	N/A	$89,938.82	N/A
Total for all systems	$329,220.00	$275,385.00	N/A	$169,428.37	N/A

Components

Actual Information Description	File Name	
Other Costs: Heating and Cooling	**Component Description:**	Crocker invoice for heating and cooling of the transmitter. NOTE ampersand does not work in the vendor name above.
	Amount:	$4,933.82

UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	**Component Description:**	Hero manages KVMM's repack on behalf of and at the direction of KVMM LLC. This invoice is for the KVMM transmitter purchased from Comark and now includes an explanation of the management and a description of the $85,005 payment made by KVMM LLC.
	Amount:	$85,005.00

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 PSILP8BB-28-CP	**$33,030.00**	**$32,400.00**		**$25,683.20**	
UHF - Lower Power Side Mount, Class A One Station antenna -- basic	$26,300.00	$26,000.00	Actual costs were greater than estimated costs. Estimated costs increased to reflect.	$25,683.20	N/A
Sweep test of existing antenna	$6,730.00	$6,400.00	N/A	$0.00	N/A
Sub-total	$33,030.00	$32,400.00	N/A	$25,683.20	N/A
Total for all systems	$329,220.00	$275,385.00	N/A	$169,428.37	N/A

Components

Actual Information Description	File Name

UHF - Lower Power Side Mount, Class A One Station antenna -- basic	**Component Description:** **Amount:** **Component Description:** **Amount:** **Component Description:** **Amount:**	Com Plus Inc. Invoice# 7966 $5,750.00 Initial 50% down payment for PO#2198-18 with cover letter. $10,199.30 Final payment for PSI Invoice #1840 PO#2198-18 $9,733.90
Sweep test of existing antenna	Information not provided.	

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 POLE	**$84,200.00**	**$10,000.00**		**$0.00**	
Short Tower (less than 500')	$84,200.00	$10,000.00	N/A	N/A	N/A
Sub-total	$84,200.00	$10,000.00	N/A	$0.00	N/A
Total for all systems	$329,220.00	$275,385.00	N/A	$169,428.37	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
Outside Professional Services	**$65,810.00**	**$93,370.00**		**$50,528.35**	
Other Costs	***$3,500.00***	$3,500.00	No predetermined cost associated with this item.	$2,240.25	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	$3,680.00	$3,500.00	N/A	$503.39	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	$2,365.00	$2,250.00	N/A	$1,621.05	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	$5,260.00	$5,120.00	N/A	$3,431.97	N/A
Prepare request for Special Temporary Authorization	$2,050.00	$1,500.00	N/A	$0.00	N/A

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	$1,580.00	$1,500.00	N/A	$750.00	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	$3,155.00	$3,000.00	N/A	$1,375.00	N/A
Perform engineering study for new channel assignment and antenna development	$7,360.00	$7,000.00	N/A	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	$2,630.00	$15,000.00	Actual Cost were greater than predetermined costs. Estimated costs increased to reflect.	$11,505.79	N/A
Project management of the transition	$31,600.00	$30,000.00	N/A	$9,032.20	N/A
Prepare and or review reimbursement form	$2,630.00	$21,000.00	The actual costs were greater than the estimated costs. Estimated costs increased to reflect.	$20,068.70	N/A
Sub-total	$65,810.00	$93,370.00	N/A	$50,528.35	N/A

Total for all systems	$329,220.00	$275,385.00	N/A	$169,428.37	N/A

Components

Actual Information Description	File Name
Other Costs	**Component Description:** Hampton Inn Invoice for Charlie Trice expenses **Amount:** $747.46 **Component Description:** Charlie Trice Airfare invoice **Amount:** $1,214.00 **Component Description:** Charlie Trice Car rental and parking charges. **Amount:** $275.49 **Component Description:** Lerman Senter Invoice #468688 - printing expenses **Amount:** $1.00 **Component Description:** Lerman Senter invoice for printing expenses and other costs associated with the transition. **Amount:** $2.30

Attorney Fees - Prepare and File request for Special Temporary Authorization	**Component Description:** **Amount:**	Lerman Senter invoice for preparing STA request $192.50
	Component Description: **Amount:**	Legal fees for KVMM June 2018 Lerman Senter Inv#469241 $310.89
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	**Component Description:** **Amount:**	Legal fees KVMM May 2018 Lerman Senter Inv# 468688 $1,107.80
	Component Description: **Amount:**	Legal fees for KVMM April 2018 Lerman Senter Inv# 468111 $513.25
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	**Component Description:** **Amount:**	Legal fees for KVMM-CD (mostly construction permit application work) - June 2017 LS Inv #457370 $3,431.97
Prepare request for Special Temporary Authorization	Information not provided.	

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	**Component Description:**	du Treil invoice for Longley Rice coverage map. March 2018. NOTE: Ampersand doesn't work in vendor name box above.
	Amount:	$500.00
	Component Description:	du Treil May 2018 Invoice for preparing Form 2100. Note ampersand is not recognized in vendor name box above.
	Amount:	$250.00
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	**Component Description:**	du Treil invoice for June 2017. NOTE: ampersand does not work in vendor name above.
	Amount:	$125.00
	Component Description:	du treil invoice for May 2017. NOTE: ampersand does not work in vendor name above.
	Amount:	$1,250.00
Perform engineering study for new channel assignment and antenna development	Information not provided.	
Address transition timing and coordination issues w/ other stations and wireless		

Component Description:	H&D Invoice for addressing coordination issues. July 2018. Inv # 45647. NOTE: Ampersand does not work in the box above.
Amount:	$9,774.41
Component Description:	Lerman Senter Invoice for addressing transition timing and coordination issues with other stations/services /providers
Amount:	$115.50
Component Description:	du Treil May 2018 Invoice for addressing coordination. Note ampersand is not recognized in vendor name box above.
Amount:	$250.00
Component Description:	Legal fees for KVMM addressing transition timing and coordination June 2018 LS Inv# 469241
Amount:	$621.78

	Component Description:	du Treil invoice for addressing coordination issues. June 2018. NOTE: Ampersand doesn't work in the vendor name box.
	Amount:	$375.00
	Component Description:	Legal fees for KVMM addressing transition timing and coordination May 2018 LS Inv# 468688
	Amount:	$369.10
Project management of the transition	**Component Description:**	LS Invoice #472276 - Dec 2018 - 10%
	Amount:	$609.00
	Component Description:	LS Invoice #473332 - February 2019
	Amount:	$1,300.00
	Component Description:	Legal project management fees for KVMM-CD - October 2017 LS Invoice #463425
	Amount:	$398.45
	Component Description:	Legal project management fees for KVMM -CD Lerman Senter Inv#468111
	Amount:	$256.00

Component Description:	Legal project management fees for KVMM-CD - June 2018 LS Invoice #469241
Amount:	$310.89
Component Description:	Legal project management fees for KVMM-CD - May 2017 LS Invoice #455642
Amount:	$605.71
Component Description:	Lerman Senter invoice for project management services relating to the transition.
Amount:	$369.00
Component Description:	LS Invoice #471656, October 2018
Amount:	$2,185.00
Component Description:	Hero Licenseco, LLC project management costs - Inv #2203
Amount:	$8,500.50
Component Description:	Legal project management fees for KVMM-CD - May 2018 LS Invoice #468688
Amount:	$1,477.15

	Component Description:	Legal project management services for KVMM; Lerman Senter Invoice# 467288
	Amount:	$684.00
	Component Description:	Lerman Senter Invoice for project management services relating to repack.
	Amount:	$752.00
	Component Description:	Legal project management fees for KVMM-CD - January 2018 LS Invoice #466531
	Amount:	$85.00
Prepare and or review reimbursement form	**Component Description:**	Lerman Senter invoce for preparing and reviewing reimbursement form
	Amount:	$462.00
	Component Description:	Legal fees for KVMM-CD - September 2017 LS Invoice #462433
	Amount:	$159.38
	Component Description:	LS Invoice #472773 -- Jan 2019
	Amount:	$420.00

Component Description:	Legal fees for KVMM-CD - July 2017 LS Inv # 461006
Amount:	$1,606.51
Component Description:	Lerman Senter invoice for preparing and reviewing reimbursement form
Amount:	$2,091.00
Component Description:	du Treil July 2017 Invoice for reviewing 399 reimbursement. Note ampersand is not recognized in vendor name box above.
Amount:	$250.00
Component Description:	du treil invoice for preparing 399, june 2017. NOTE ampersand does not work in vendor name box.
Amount:	$1,000.00
Component Description:	Legal fees for KVMM April 2018 Lerman Senter Inv# 468111
Amount:	$513.25
Component Description:	LS Invoice #471656, October 2018
Amount:	$2,185.00

Component Description:	Legal fees for KVMM Lerman Senter Inv# 468688
Amount:	$738.45
Component Description:	Legal fees for KVMM; Lerman Senter Inv#467288
Amount:	$836.00
Component Description:	LS Invoice #472276 - Dec 2018 - 90%
Amount:	$5,481.00
Component Description:	du Treil invoice June 2017. NOTE: Ampersand does not work in vendor box above.
Amount:	$250.00
Component Description:	Lerman Senter invoice for preparing and reviewing reimbursement form.
Amount:	$3,008.00
Component Description:	Legal fees for KVMM June 2018 Lerman Senter Inv# 469241
Amount:	$829.04

Component Description:	Legal fees for KVMM-CD - August 2017 LS Inv #462129
Amount:	$239.07

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	**$15,180.00**	**$14,615.00**		**$3,278.00**	
Develop and air announcement of upcoming channel change	***$2,500.00***	$2,500.00	Estimate of costs associated with on-air announcements of channel change.	N/A	N/A
Equipment Delivery and Handling Charges	***$600.00***	$600.00	Antenna will need to be shipped freight from Pennsylvania to California. Estimated crated shipping weight of 200 lbs.	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	$195.00	$190.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	$335.00	$325.00	N/A	$325.00	N/A
DTV Medical Facility Notification	$11,550.00	$11,000.00	N/A	$2,953.00	N/A
Sub-total	$15,180.00	$14,615.00	N/A	$3,278.00	N/A
Total for all systems	$329,220.00	$275,385.00	N/A	$169,428.37	N/A

Components

Actual Information Description	File Name
Develop and air announcement of upcoming channel change	Information not provided.
Equipment Delivery and Handling Charges	Information not provided.
FCC Filing Fees - Special Temporary Authorization request	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	**Component Description:** Lerman Senter FCC Filing Fee Cost for KVMM LS Inv#469241 **Amount:** $325.00
DTV Medical Facility Notification	**Component Description:** KVMM - DTVNotification.com, Notifications to Medical Facilities **Amount:** $2,953.00

Cost Information

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	$329,220.00	$275,385.00	$169,428.37

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.	**Christa D'Alimonte** *Senior Vice President and Assistant Secretary* 02/07/2019

Certification

Section	Question	Response
Submission of Actual Cost Documentation Statements	WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).	
	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.	**Christa D'Alimonte** *Senior Vice President and Assistant Secretary* 02/07/2019

Attachments