

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility	168014	Service: DCA	Call	W15EA-D	Channel: 15 (UHF)
ID:			Sign:		
File	000002	5765			
Number:					
FRN: 002	6907345	Date	05/28		
		Submitted:	/2019		

Applicant Name, Type, and Contact Information

Applicant Information

1	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 Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer	Preparer Contact Name and Information					
Contact Information	Applicant	Address	Phone	Email		
	The Preparer is same as the reimbursement contact.					

Broadcaster	Question	Response
Information and Transition Plan	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	Existing Transmitter Information					
Transmitter	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				
	Manufacturer and Type	Model	DTU2KU-50			
		Year	2010			
		Туре	Solid State			
		Solid State Cooling	Air Cooled			
		Solid State Power Capacity	2 kW			

Existing Transmitter Information

Primary	New Transmitter Costs					
Transmitter	Section	Question	Response			
	New Transmitter	Use	Primary (Main)			
		Change Type	Purchase New			
		Is this a request for upgraded equipment?	Yes			
		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	Other Transmitter Costs					
Transmitter	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
	Туре	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

Other Transmitter Cost Not Listed

Other Transmitter CoTransmitterInformation not provided.

Antennas Section		Question	Response
Antenna Rela	ated Expenses	Do you have antenna related expenses?	Yes

Primary	Existing Antenna Information					
Primary Antenna	Section	Section Question				
	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	Class	Class A			
	Manufacturer and Type	Mounting	Side Mount			
		Antenna position in stack	Not in Stack			
		Polarization	Horizontal			
		Туре	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	New Antenna Costs			
Antenna	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	
		Туре	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	
		Туре		
		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	

Other Antenna Costs

Primary Other Antenna Cost Not Listed

Antenna Information not provided.

Transmissior	n Seffien	Question	Response
	Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

Primary	Existing Transmission Line		
Transmission Line Description	on Line Section	Question	Response
	-	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	Manufacturer	
Line M Type	Line Manufacturer and Type	Туре	Flexible Air
		Diameter	3 inches
		Other Diameter	N/A
		Segment Length	N/A
		Other Segment Length	N/A
		Number of parallel runs	1
		Length	120 feet per run

Existing Transmission Line

Primary	New Transmission Line		
Transmissio	New Transmission Line Costs	Question	Response
		Use	Primary (Main)
		Description of Use	N/A
		Change Type	Purchase New
		Is this a request for upgraded equipment?	No
		Туре	Flexible Air
		Diameter	3 inches
		Other Diameter	N/A
		Segment Length	N/A
		Other Segment Length	N/A
		Number of parallel runs	1
		Length	120 feet per run
		Justification for New Transmission Line	Added 120' to existing transmission line to move to a new location in the building.

Other Transmission Line Expenses Not Listed Transmission

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

marv	Existing	Tower
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Primary	Existing Tower			
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	
		Is tower compliant with Rev G?	Yes	
	Existing Tower Structure Registration	Do you have a tower registration number?	Yes	
		ASR Number	1057943	
	Coordinates (NAD83 (North American Datum of 1983))	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
58397	WEGR	FM
11907	WATN-TV	DTV
68518	WLMT	DTV
60830	WBUY-TV	DTV

Primary Tower Modification Costs

Tower

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 Rigging Costs

Tower	Section	Question	Response
	Tower Rigging Costs	Complex Tower	Candelabra

Other Tower Expenses Not Listed Primary Tower

Information not provided.

Outside	Section	Question	Response
Professional	Services Costs 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	Prepare and file Form FCC Construction Permit Application	Yes
Services	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

Other Professional Services Expenses Not Listed Professional Services roostsided.

Other	Section	Question	Response
Expenses	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 Not Listed

Expenses Information not provided.

Transmitters

Cost Information

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	\$168,934.00		\$128,537.12	
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$120,000.00	N/A	\$80,853.12	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$1,300.00	\$1,250.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$47,684.00	See attached quote from Ellendale.	\$47,684.00	N/A
Sub-total	\$165,500.00	\$168,934.00	N/A	\$128,537.12	N/A
Total for all systems	\$904,643.00	\$822,861.40	N/A	\$173,851.92	N/A

Actual Information	
Description	File Name

UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	Component Description: Amount:	Transmitter related cost. #2018005 \$2,924.30
	Component Description: Amount:	Shipping cost. #3684 \$793.00
	Component Description: Amount:	Transmitter cost, upgrade excluded. #3658 \$75,934.57
	Component Description: Amount:	Transmitter related costs. #3658 \$80,118.80
	Component Description: Amount:	Installation of transmitter and traveling expenses \$2,162.50
	Component Description: Amount:	FCC Channel Repack \$80,118.80
	Component Description: Amount:	Transmitter related cost. #20170034 \$1,201.25
	Component Description:	Installation and travel expense. #20170034
	Amount:	\$2,001.25

2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Switchgear - industrial 800 amp	Component Description:	Transmitter related cost, 80% balance. #SPI-
	Amount:	008386 \$37,512.00
	Component Description:	Transmitter related cost, 20%
	Amount:	down. #SVI- 106944 \$10,172.00

Antennas

Cost Information

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

Description Primary	Predetermined Cost Estimate \$27,093.00	Estimated Cost \$25,793.00	Estimated Cost Justification	Actual Cost \$19,966.18	Actual Cost Justification
Antenna AL12OC-15	¥21,000.00	Ψ25,1 33.00		ψ13,300.10	
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.
Freight	\$793.00	\$793.00	***System Notice: Estimate adjusted and locked because line has been superseded. ***Updating estimated cost per FCC requirement.	\$0.00	Second item "Need More Information - \$591.18" should be removed.
Sub-total	\$27,093.00	\$25,793.00	N/A	\$19,966.18	N/A
Total for all systems	\$904,643.00	\$822,861.40	N/A	\$173,851.92	N/A

Components

Actual Information Description

File Name

UHF - Lower Power Side Mount, Class A One Station **Component Description:** 50% downpayment, upgrade excluded. #W50EA-D-001 Amount: \$5,437.50 **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:** 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. Downpayment upon acceptance of the agreement. #1924 \$3,000.00 Amount:

	Component Description: Amount:	Antenna replacement related cost. #1961 \$5,500.00
	Component Description: Amount:	Balance of the agreement. Antenna replacement related cost. #1961 \$5,500.00
	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. \$9,750.00
Freight		
	Component Description: Amount:	Freight cost for antenna. #3684 \$793.00
	Component Description: Amount:	Freight costs \$591.18

Transmission Line

Cost Information

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	\$7,080.00	\$7,224.60		\$7,224.60	
Flexible Air Transmission Line - dielectric, 3"	\$7,080.00	\$7,224.60	See attached quote from Kathrein, freight cost was not included in the quote.	\$7,224.60	N/A
Sub-total	\$7,080.00	\$7,224.60	N/A	\$7,224.60	N/A
Total for all systems	\$904,643.00	\$822,861.40	N/A	\$173,851.92	N/A

Actual Information Description	File Name	
Flexible Air Transmission Line - dielectric, 3"	Component Description: Amount:	TL cost, 50% balance plus shipping cost. #183611 \$3,973.05
	Component Description: Amount:	TL cost, 50% down. #16635-01 \$3,251.55

Tower Equipment and Rigging Costs

Cost Information

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	\$904,643.00	\$822,861.40	N/A	\$173,851.92	N/A

Actual Information	
Description	File Name

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

Outside Professional Services

Cost Information

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	\$37,824.80		\$13,096.25	
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Prepare 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), License to Cover Application	\$1,580.00	\$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	\$621.45	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$320.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$580.00	N/A
Project management of the transition	\$63,200.00	\$11,574.80	N/A	\$11,574.80	N/A
Sub-total	\$91,280.00	\$37,824.80	N/A	\$13,096.25	N/A
Total for all systems	\$904,643.00	\$822,861.40	N/A	\$173,851.92	N/A

Actual Information Description	File Name
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.

Prepare request for Special Temporary Authorization	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare engineering section of FCC Form 2100		
(main), Construction Permit	Component Description:	CP preparation. #201757
Application	Amount:	\$60.00
	Component Description:	CP preparation
	Amount:	\$262.50
	Component Description:	CP application.
	Amount:	#201757 \$60.00
	Amount.	\$00.00
	Component Description:	Engineering review
	Amount:	\$233.33
	Component Description:	Form 399 filing
	Amount:	\$65.62
Perform engineering study for new channel		
assignment and antenna	Component Description:	Engineering services.
development		#20170034
	Amount:	\$320.00
	Component Description:	Engineering study
	Amount:	\$320.00
	Component Description:	Engineering
		services.
	Amount:	
	Component Description: Amount:	

reimbursement form Component Description: Amount: Component Description: Amount: Component Description: Amount:	Prepare and review reimbursement form. #201757 \$180.00 FCC 399 preparation. #201757 \$180.00 Review reimbursement form. #20170034 \$400.00
Component Description: Amount: Component Description:	form. #201757 \$180.00 FCC 399 preparation. #201757 \$180.00 Review reimbursement form. #20170034 \$400.00
Component Description: Amount: Component Description:	\$180.00 FCC 399 preparation. #201757 \$180.00 Review reimbursement form. #20170034 \$400.00
Component Description: Amount: Component Description:	FCC 399 preparation. #201757 \$180.00 Review reimbursement form. #20170034 \$400.00
Amount: Component Description:	preparation. #201757 \$180.00 Review reimbursement form. #20170034 \$400.00
Amount: Component Description:	#201757 \$180.00 Review reimbursement form. #20170034 \$400.00
Component Description:	\$180.00 Review reimbursement form. #20170034 \$400.00
	reimbursement form. #20170034 \$400.00
	reimbursement form. #20170034 \$400.00
Amount:	\$400.00
Amount:	
	FCC 399 Update
Component Description:	
	Preparation of CP
Amount:	\$240.00
Component Description:	FCC 399 update
Amount:	\$400.00
Component Description:	Form 399
	preparation.
	#20170034
Amount:	\$400.00
Project management of the transition	Dortion of general
Component Description:	Portion of general repack matter
	invoice attributable
	to this station -
	divided by 15
Amount:	stations. #471659 \$1,206.00
Amount:	φ1,200.00

Component Description:	Portion of general repack matter invoice attributable to this station - divided by 10 stations. #1129 \$1,758.65
Component Description: Amount:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1116 \$1,254.03
Component Description: Amount:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #472232 \$901.10
Component Description: Amount:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #472568 \$985.76
Component Description: Amount:	Portion of general repack matter invoice attributable to this station - divided by 10 stations. #1122 \$1,979.10

Component Description:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1104 \$644.80
Component Description:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1112 \$521.40
Component Description:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1096 \$714.93
Component Description:	Portion of general repack matter invoice attributable to this station - divided by 15 stations. #1118 \$1,609.03

Other Expenses

Cost Information

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	
Develop and air announcement of upcoming channel change	\$1,000.00	\$1,000.00	N/A	N/A	N/A
Local Zoning	\$500.00	\$500.00	N/A	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	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$1,777.77	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A
Sub-total	\$14,690.00	\$14,085.00	N/A	\$1,777.77	N/A
Total for all systems	\$904,643.00	\$822,861.40	N/A	\$173,851.92	N/A

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

Grand Total			
	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$904,643.00	\$822,861.40	\$173,851.92
		Predetermined Cost Estimate	Predetermined Cost Estimate Estimated Cost

Reimbursem	envestianus	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.	
		 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. 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).
- 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.	Les Levi Chief Operating Officer
	05/28/2019

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).	
		 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).
- 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.

	The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission. 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.	
an aut name	are, under penalty of perjury, that I am thorized representative of the above- d applicant for the Authorization(s) ied above.	Les Levi Chief Operating Officer
		05/28/2019

Attachments