



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **59139** | Service: **DTV** | Call **KTVN** | Channel:
ID: | Sign:
11 (High VHF) | File **0000025334**
Number:
FRN: **0002900330** | Date **06/26**
Submitted: **/2019**

Applicant Information Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|---|---|----------------------|-------------------|----------------|
| SARKES TARZIAN, INC. Doing Business As: SARKES TARZIAN, INC. | Station KTVN 205 NORTH COLLEGE AVENUE SUITE 800 BLOOMINGTON, IN 47402 United States | +1 (812) 332-7251 | lfox@ktvn. com | Corporation |

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 |
|---|---|-----------------------|---------------------------|
| Nancy Ory , Esq . <i>Lerman Senter</i> <i>PLLC</i> | 2001 L St NW Suite 400 Washington, DC 20036 United States | +1 (202) 416- 6791 | nory@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. | Yes |
| Briefly describe transition plan | Retune existing primary transmitter to the new channel. Replace non retunable auxiliary transmitter on the new channel. Replace mask filter, low pass filter and combiner. Modify existing exhaust and electrical system for install. Proof |

Transmitters

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

Primary Transmitter

Existing Transmitter Information

| Section | Question | Response |
|--|--|-----------------|
| Existing Transmitter Description | Type of change | Retune Existing |
| | Use | Primary (Main) |
| | Ownership | Owned |
| | Owner | N/A |
| | Is this transmitter currently shared with another station? | No |
| | Is this transmitter currently in operating condition? | Yes |
| Existing Transmitter Manufacturer and Type | Manufacturer | Gates Air |
| | Model | VAX 3D |

| | |
|----------------------------|-------------|
| Year | 2016 |
| Type | Solid State |
| Solid State Cooling | Air Cooled |
| Solid State Power capacity | 4.5 kW |

Primary Transmitter Retuning Transmitter Costs

| Section | Question | Response |
|------------------------|--|----------|
| New IOT Tubes | Number of Tubes (including accessories) needed | N/A |
| New Mask Filter | Power | 10 kW |
| | Other Power | N/A |
| New Exciter | Is a new exciter needed? | No |

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 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 |
|------------------------------|---|
| Combiner Testing | Test the combiner for the new channel designation |
| Other Costs: Ductwork | Ductwork for Transmitter |
| Combiner installation | Modify transmission line from existing 2 port combiner to new 4 port combiner |
| combiner | new combiner tuned to the new channel designation |

**Auxiliary
Transmitter****Add Transmitter Information**

| Section | Question | Response |
|---|--|-----------------------|
| Existing Transmitter Description | Type of change | Purchase New |
| | Use | Auxiliary (Backup) |
| | Description of Use | Auxiliary |
| | 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 | Platinum |
| | Year | 2003 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 20 kW |

**Auxiliary
Transmitter**

New Transmitter Costs

| Section | Question | Response |
|------------------------|---|---|
| New Transmitter | Use | Auxiliary (Backup) |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | No |
| | Manufacturer | |
| | Model | VAXTE- 6R44 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power capacity | 6.4 kW |
| | Justification for New Transmitter | Existing Auxiliary transmitter is not re- tunable to the new designated channel. |

**Auxiliary
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 | Reconnection using existing wiring from currently installed Auxiliary to new Auxiliary |
| 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 |

Auxiliary Transmitter

Other Transmitter Cost Not Listed

| Name | Description |
|------------------------------|---|
| Air Exhaust | modify existing exhaust ductwork from current Auxiliary's Harris Platinum configuration to new Auxiliary's Gates Air Vax TE 8 configuration |
| Other Costs: Ductwork | Ductwork for transmitter |

| Antennas | Section | Question | Response |
|-----------------|---------------------------------|---------------------------------------|-----------------|
| | Antenna Related Expenses | Do you have antenna related expenses? | No |

| 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? | No |

| 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 will manage the reimbursement filings, review engineering applications, and engage in any additional coordination that is needed for KTVN to accomplish its repack transition over the three 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 | No |
| | Quantity | N/A |
| | 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 | No |
| | Quantity | N/A |
| | 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 | Yes |
| | RF exposure measurements | Yes |
| | Additional Field Engineering Service | No |
| | Number of Days | N/A |
| | Justification | N/A |

Other Professional Services Expenses Not Listed

**Outside
Professional
Services
Costs**

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

**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 VAX 3D | \$248,350.00 | \$134,840.00 | | \$107,542.84 | |
| combiner | <i>\$120,000.00</i> | \$120,000.00 | N/A | \$94,806.84 | N/A |
| Combiner installation | <i>\$10,000.00</i> | \$10,000.00 | N/A | \$7,980.00 | N/A |
| Other Costs: Ductwork | <i>\$4,000.00</i> | \$4,000.00 | Estimated Cost of Ductwork on Combiner | \$4,000.00 | N/A |
| Combiner Testing | <i>\$840.00</i> | \$840.00 | N/A | \$756.00 | N/A |
| 10 kW mask filter | \$8,310.00 | \$0.00 | Mask filter built into combiner. No need for an external filter. | \$0.00 | N/A |
| UHF and VHF - minor banding issues | \$105,200.00 | \$0.00 | Imputed per instructions | N/A | N/A |
| Auxiliary Transmitter VAXTE-6R44 | \$175,000.00 | \$175,000.00 | | \$128,781.21 | |
| High VHF - Air Cooled Solid State Transmitter 6.4 kW | <i>\$165,000.00</i> | \$165,000.00 | estimate from Gates Air | \$128,781.21 | N/A |

| | | | | | |
|--|-------------------|--------------|-----|--------------|-----|
| Other Electrical Service: Reconnection using existing wiring from currently installed Auxiliary to new Auxiliary | <i>\$5,000.00</i> | \$5,000.00 | N/A | N/A | N/A |
| Other Costs: Ductwork | <i>\$0.00</i> | \$0.00 | N/A | N/A | N/A |
| Air Exhaust | <i>\$5,000.00</i> | \$5,000.00 | N/A | N/A | N/A |
| Sub-total | \$423,350.00 | \$309,840.00 | N/A | \$236,324.05 | N/A |
| Total for all systems | \$615,377.50 | \$403,522.50 | N/A | \$280,647.06 | N/A |

Components

| Actual Information | |
|--------------------|---|
| Description | File Name |
| combiner | <p>Component Description: Dielectric Invoice 242058 for outstanding combiner work; with change order and revised quote.</p> <p>Amount: \$6,472.60</p> <p>Component Description: KTVN - Dielectric combiner plus combiner accessories cost; 1st 45% payment - Invoice #MAN00243, PO #1546 with quote.</p> <p>Amount: \$43,359.12</p> |

Component Description: Dielectric Invoice for Elbow and Coupling; Inv # 279006 PO# 1546
Amount: \$1,616.00

Component Description: Dielectric Invoice for elbow and coupling per attached change order (in attached invoice).
Amount: \$1,616.00

Component Description: 45% of Dielectric Invoice for combiner
Amount: \$48,026.75

Component Description: Dielectric Invoice # 242058
Amount: \$6,472.60

Component Description: KTVN - Dielectric combiner plus combiner accessories cost; 2nd 45% payment - Invoice #MAN00416, PO #1546 with quote.
Amount: \$43,359.12

| | |
|-----------------------|---|
| Combiner installation | <p>Component Description: KTVN - Dielectric combiner installation cost; 1st 45% payment - Invoice #MAN00243, PO #1546 with quote.</p> <p>Amount: \$1,890.00</p> <p>Component Description: Dielectric Combiner Install and Sweep Testing. Invoice# 301024.</p> <p>Amount: \$4,200.00</p> <p>Component Description: KTVN - Dielectric combiner installation cost; 2nd 45% payment - Invoice #MAN00416, PO #1546 with quote.</p> <p>Amount: \$1,890.00</p> |
| Other Costs: Ductwork | <p>Component Description: Applied Mechanical Invoice for Ductwork, with PO.</p> <p>Amount: \$4,000.00</p> <p>Component Description: Applied Mechanical Invoice # 15371</p> <p>Amount: \$4,000.00</p> |

| | |
|--|---|
| Combiner Testing | <p>Component Description: KTVN - Dielectric combiner testing cost; 1st 45% payment - Invoice #MAN00243, PO #1546 with quote.</p> <p>Amount: \$378.00</p> <p>Component Description: KTVN - Dielectric combiner testing cost; 2nd 45% payment - Invoice #MAN00416, PO #1546 with quote.</p> <p>Amount: \$378.00</p> |
| 10 kW mask filter | Information not provided. |
| UHF and VHF - minor banding issues | Information not provided. |
| High VHF - Air Cooled Solid State Transmitter 6.4 kW | <p>Component Description: Final invoice for actual tax, freight, and installation costs. Costs originally left off first two invoices.</p> <p>Amount: \$25,072.96</p> <p>Component Description: KTVN - GatesAir transmitter, installation, RF system, electrical; 2nd 1/3 payment - Invoice #JW30004271-2, PO #1503 with quote and cover letter (estimated tax omitted).</p> <p>Amount: \$38,483.05</p> |

| | |
|--|---|
| | <p>Component Description: KTVN - GatesAir transmitter, installation, RF system, electrical; 1st 1/3 payment - Invoice #JW30004271-DP, PO #1503 with quote and cover letter (estimated tax omitted).</p> <p>Amount: \$38,483.05</p> <p>Component Description: transmitter</p> <p>Amount: \$49,782.27</p> <p>Component Description: Second 1/3 Payment of Gates Air Transmitter costs; minus estimated sales tax and estimated shipping.</p> <p>Amount: \$38,483.05</p> <p>Component Description: GatesAir Invoice # US0317050</p> <p>Amount: \$26,742.15</p> |
| Other Electrical Service: Reconnection using existing wiring from currently installed Auxiliary to new Auxiliary | Information not provided. |
| Other Costs: Ductwork | Information not provided. |
| Air Exhaust | Information not provided. |

Cost Information **Antennas**
Information not provided.

Cost Information **Transmission Line**
Information not provided.

Cost Information **Tower Equipment and Rigging Costs**
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 | \$159,200.00 | \$69,850.00 | | \$34,073.75 | |
| RF Exposure Measurements | \$21,050.00 | \$8,000.00 | 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 | N/A | N/A |

| | | | | | |
|--|--------------|--------------|---|--------------|---|
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,580.00 | \$500.00 | N/A | \$250.00 | N/A |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$2,000.00 | N/A | \$1,837.50 | Subtotal invoice includes other line items. |
| Project management of the transition | \$31,600.00 | \$30,800.00 | Actual cost of project management exceeded estimate. Updated estimate cost per instruction. | \$26,506.25 | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$3,300.00 | Actual cost exceeded the Widelity Estimate. | \$3,230.00 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$3,000.00 | N/A | \$2,250.00 | N/A |
| Comprehensive coverage verification via field study, if needed | \$84,200.00 | \$15,000.00 | N/A | N/A | N/A |
| Sub-total | \$159,200.00 | \$69,850.00 | N/A | \$34,073.75 | N/A |
| Total for all systems | \$615,377.50 | \$403,522.50 | N/A | \$280,647.06 | N/A |

Components

| Actual Information Description | File Name |
|--|---|
| RF Exposure Measurements | 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 engineering section of FCC Form 2100 (main), License to Cover Application | <p>Component Description: Chesapeake Invoice 4848 for preparing and uploading application for license to cover.</p> <p>Amount: \$250.00</p> |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | <p>Component Description: Remainder of invoice (\$625) is separate line item for review of repacked channel assignment.</p> <p>Amount: \$1,837.50</p> |
| Project management of the transition | <p>Component Description: Legal project management services - Lerman Senter # 464474.</p> <p>Amount: \$131.25</p> |

Component Description: Legal project management services - Lerman Senter # 466565.
Amount: \$656.25

Component Description: KTVN Lerman Senter invoice, August 2018
Amount: \$2,433.75

Component Description: KTVN Lerman Senter legal invoice, July 2018
Amount: \$2,028.75

Component Description: Legal project management services - Lerman Senter # 467672.
Amount: \$2,561.25

Component Description: Project management - advice and counsel regarding repack and reimbursement process
Amount: \$4,036.25

Component Description: Project management involving FRN association and banking information.
Amount: \$1,050.00

| | |
|---|--|
| | <p>Component Description: Legal project management services - Lerman Senter # 463906.</p> <p>Amount: \$656.25</p> <p>Component Description: Legal project management services - Lerman Senter # 468167.</p> <p>Amount: \$4,203.75</p> <p>Component Description: Legal project management services - Lerman Senter # 461719.</p> <p>Amount: \$1,050.00</p> <p>Component Description: Work includes FCC Forms 1876, 2100 and 399.</p> <p>Amount: \$6,300.00</p> <p>Component Description: KTVN Lerman Senter invoice, September 2018</p> <p>Amount: \$2,580.00</p> |
| <p>Prepare and or review reimbursement form</p> | <p>Component Description: KTVN Lerman Senter legal services invoice for invoice review</p> <p>Amount: \$338.75</p> <p>Component Description: Work was primarily FCC Forms 2100 and 399.</p> <p>Amount: \$2,891.25</p> |

| | |
|---|---|
| <p>Perform engineering study for new channel assignment and antenna development</p> | <p>Component Description: \$625.00 of invoice for engineering study for new channel assignment. \$1,837.50 of invoice for CP application - separate line item.</p> <p>Amount: \$625.00</p> <p>Component Description: Engineering study for new channel assignment</p> <p>Amount: \$1,625.00</p> |
| <p>Comprehensive coverage verification via field study, if needed</p> | <p>Information not provided.</p> |

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 | \$32,827.50 | \$23,832.50 | | \$10,249.26 | |
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$0.00 | N/A | N/A | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$4,000.00 | N/A | \$2,950.00 | N/A |
| FCC Filing Fees - Form 2100 minor change CP application | \$1,110.00 | \$0.00 | N/A | N/A | N/A |
| BLM or NFS Coordination | <i>\$1,000.00</i> | \$1,000.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | <i>\$18,832.50</i> | \$18,832.50 | Estimated Dielectric freight of \$5,332.50 plus an estimated Gates Air freight of \$4,500.00 *3 (\$13,500.00). | \$7,299.26 | N/A |
| Develop and air announcement of upcoming channel change | <i>\$0.00</i> | \$0.00 | N/A | N/A | N/A |

| | | | | | |
|-------------------------------------|--------------|--------------|-----|--------------|-----|
| MVPD Notification of Channel Change | \$0.00 | \$0.00 | N/A | N/A | N/A |
| Sub-total | \$32,827.50 | \$23,832.50 | N/A | \$10,249.26 | N/A |
| Total for all systems | \$615,377.50 | \$403,522.50 | N/A | \$280,647.06 | N/A |

Components

| Actual Information Description | File Name |
|--|--|
| FCC Filing Fees - Form 2100 license to cover application | Information not provided. |
| DTV Medical Facility Notification | <p>Component Description: KTVN - medical facility notifications cost. Invoice # 1060, PO # 1706.</p> <p>Amount: \$2,950.00</p> |
| FCC Filing Fees - Form 2100 minor change CP application | Information not provided. |
| BLM or NFS Coordination | Information not provided. |
| Equipment Delivery and Handling Charges | <p>Component Description: KTVN - GatesAir transmitter freight; 1st 1/3 payment - Invoice #JW30004271-DP, PO #1503 with quote.</p> <p>Amount: \$4,500.00</p> <p>Component Description: O'Brien's Invoice# 12389</p> <p>Amount: \$1,250.00</p> |

| | |
|---|---|
| | <p>Component Description: KTVN - Dielectric combiner freight cost; 2nd 45% payment - Invoice #MAN00416, PO #1546 with quote.</p> <p>Amount: \$2,399.63</p> <p>Component Description: O'brien's invoice #12388</p> <p>Amount: \$1,250.00</p> <p>Component Description: KTVN - GatesAir transmitter freight; 2nd 1/3 payment - Invoice #JW30004271-2, PO #1503 with quote.</p> <p>Amount: \$4,500.00</p> <p>Component Description: KTVN - Dielectric combiner freight cost; 1st 45% payment - Invoice #MAN00243, PO #1546 with quote.</p> <p>Amount: \$2,399.63</p> |
| Develop and air announcement of upcoming channel change | Information not provided. |
| MVPD Notification of Channel Change | Information not provided. |

Cost Information **Grand Total**

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|------------------------------|------------------------------------|-----------------------|--------------------|
| Total for all systems | \$615,377.50 | \$403,522.50 | \$280,647.06 |

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 Actual Cost Documentation Statements | <p>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).</p> | |
| | | <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.

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.

**Lawson
Fox**
*Vice
President*

06/26/2019

Attachments