



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **10202** | Service: **DTV** | Call **KSCE** | Channel: **21 (UHF)**
ID: | Sign:
File **0000027688**
Number:
FRN: **0008529935** | Date **07/01**
Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|--|---|--------------|-----------------------|----------------|
| CHANNEL 38 CHRISTIAN TELEVISION | GRACE G. RENDALL | +1 (915) | GRACER143@AOL. COM | Not-for-Profit |
| Doing Business As: CHANNEL 38 CHRISTIAN TELEVISION | 2201 EAST WYOMING AVENUE EL PASO, TX 79903 United States | 532- 8588 | | |

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 |
|---|---|----------------------|-----------------------------|
| Joseph C. Chautin III <i>Attorney</i> <i>Hardy, Carey, Chautin & Balkin, LLP</i> | 1080 West Causeway Approach Mandeville, LA 70471 United States | +1 (985) 629-0777 | jchautin@hardycarey. 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 | Replace existing Ch38/39 antenna with a wideband antenna. Replace transmission line, with 4" Heliac. This keeps the center of radiation and location on tower the same, allowing either channel to be able to operate. Replace the 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 | NV7340V |
| | Year | 2016 |
| | Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power Capacity | 5 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 | TMU9-5 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power capacity | 3.0 kW |
| | Justification for New Transmitter | Existing Main transmitter is no longer supported by manufacturer. AXCERA Innovator HX original transmitter replaced with current R&S NV7340 in December, 2016, due to severe system failure. See Narrative. |

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**
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? | 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 | Full Power |
| | 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) | 150.0 kW |
| | Manufacturer | |

| | |
|-------|-------------------|
| Model | PSIUSMD24AP-38/39 |
| Year | 2006 |

**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 | Full Power |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | Type | Broadband Slot |
| | Number of Stations Supported | 2 |
| | Number of Panels/Bays | 24 |
| | Lower Limit | 500.00 MHz |
| | Upper Limit | 626.00 MHz |
| | Design power capacity in use | 19.0 % |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 75.0 kW |
| | Manufacturer | |
| | Model | RD-24C170-500626-SL |

| | |
|-------------------------------|--|
| Year | 2017 |
| Justification for New Antenna | Broadband antenna to replace existing Ch 39 antenna to accommodate both existing Ch 39 and repack Ch 21. No tower modifications required. Helix 4" line to replace existing 6-1/8" rigid coax. |

Primary Antenna

Other Antenna Costs

| Section | Question | Response |
|------------------------------------|---|------------|
| Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | Yes |
| | Type | New |
| | Number of channels supported | 2 |
| | Frequencies of channels supported | RF channel |
| | Frequency | N/A |
| | Do you need a combiner output splitter /switcher for dual feed lines? | No |
| 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? | Yes |

| | | |
|---------------------------------|---|-----|
| Pattern Scatter Analysis | Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna? | Yes |
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | Yes |

Enter a list of RF channel numbers.

RF Channel Number

39

21

**Primary
Antenna**

Other Antenna Cost Not Listed

Information not provided.

**Transmission
Line**

| Section | Question | Response |
|---------------------------------------|---|----------|
| Transmission Line Related Expenses | Do you have transmission line related expenses? | Yes |

**Primary
Transmission
Line**

Existing Transmission Line

| Section | Question | Response |
|---|--|---------------------|
| Existing Transmission Line Description | Type of change | Purchase New |
| | Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is the existing transmission line shared with another station or stations? | No |
| | Is Transmission Line in operating condition? | Yes |
| Existing Transmission Line Manufacturer and Type | Manufacturer | |
| | Type | Rigid |
| | Diameter | 6 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | 20 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 362 feet per run |

**Primary
Transmission
Line** **New Transmission Line**

| Section | Question | Response |
|------------------------------------|---|---|
| New Transmission Line Costs | Use | Primary (Main) |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | No |
| | Type | Flexible Air |
| | Diameter | 4 inches |
| | Other Diameter | N/A |
| | Segment Length | N/A |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 362 feet per run |
| | Justification for New Transmission Line | Existing line is 20 ft. and will not accommodate Ch 21 repack assignment. The 4" Helix will accommodate both Ch 39 and Ch 21. See Narrative |

**Primary
Transmission
Line** **Other Transmission Line Expenses Not Listed**

Information not provided.

Tower Equipment And Rigging Costs

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

Primary Tower

Existing Tower

| Section | Question | Response |
|--|---|-------------------|
| Existing Tower Description | Type of change | Modify Existing |
| | Tower Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Leased |
| | Is this tower consider Complex? | No |
| | Is this tower currently shared with any other stations? | Yes |
| | One or more FM, AM or TV radio broadcaster(s) | Yes |
| | Others Types of Users | No |
| | Is tower documented for structural analysis? | No |
| | Is tower compliant with Rev G? | Unknown |
| Existing Tower Structure Registration | Do you have a tower registration number? | Yes |
| | ASR Number | 1202400 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 31° 48' 18.9" N- |
| | Longitude (NAD83) | 106° 29' 00.7" W- |
| | Overall Structure Height | 388.12 feet |
| | Support Structure Height | 340.88 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 5604.92 feet |

| | |
|------------------|--|
| Structure Type | TOWER - Free Standing or Guyed Structure |
| Tower Owner | Pinnacle Towers LLC |
| Date Constructed | 01/05/2000 |

**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 |
|-------------|-----------|---------|
| 67760 | KTSM-TV | DTV |
| 68753 | KTFN | DTV |
| 49832 | KVIA-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 documented tower |
| 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 | N/A |
| Helicopter Services Required | Are helicopter services required? | No |

**Primary
Tower**

Other Tower Expenses Not Listed

| Name | Description |
|---------------|---|
| Tower Rigging | Tower rigging required to exchange antennas, install new 4" Helix and remove existing 6-1/8" rigid coax |

Outside Professional Services Costs

| Section | Question | Response |
|---|--|---|
| Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 695 |
| | Explanation | Interface with landlord, reimbursement filing, expense tracking, progress reporting, budget creation, coordinate tower crew, manufacturers and other contractors, deliveries, installation and other work on site by the construction deadline for phase 8. |
| 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 | Yes |
| | 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 Attorney Fees | Attorney Fees and Other Matters outside of Construction Permit Application and Licence to Cover |

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 | 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)? | Yes |
| | Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs? | No |
| | Does this relocation require Equipment Storage? | Yes |
| | Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change? | Yes |
| | Does this relocation require MVPD Notification of a Channel Change? | Yes |

**Other
Expenses**

Other Expenses Not Listed

Information not provided.

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 TMU9-5 | \$195,000.00 | \$195,000.00 | | \$145,035.00 | |
| UHF - Air Cooled Solid State Transmitter 3.0 kW | <i>\$195,000.00</i> | \$195,000.00 | N/A | \$145,035.00 | N/A |
| Sub-total | \$195,000.00 | \$195,000.00 | N/A | \$145,035.00 | N/A |
| Total for all systems | \$1,089,493.00 | \$859,909.00 | N/A | \$692,732.79 | N/A |

Components

| Actual Information Description | File Name |
|---|--|
| UHF - Air Cooled Solid State Transmitter 3.0 kW | Component Description: R&S TMU9-5 transmitter w /installation and parts |
| | Amount: \$14,503.50 |
| | Component Description: R&S TMU9-5 transmitter w /installation and parts |
| | Amount: \$58,014.00 |
| | Component Description: Primary Transmitter |
| | Amount: \$72,517.50 |

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 RD-24C170-500626-SL | \$161,955.00 | \$87,374.00 | | \$86,887.80 | |
| Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost) | \$5,260.00 | \$5,000.00 | Study required to determine best distance from tower to be able to make proper brackets. | \$5,000.00 | N/A |
| Side mount brackets for high power antennas (if not included in antenna base cost) | \$23,150.00 | \$14,989.00 | Per Marsand, Inc. Invoice 7011 | \$14,989.00 | N/A |
| New combiner, cost per channel (without antenna) | \$84,200.00 | \$18,370.00 | 2 channel 3.5 kW combiner with shipping | \$18,370.00 | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | Sweep test of new line and antenna with report. | \$6,400.00 | N/A |

| | | | | | |
|--|--------------------|--------------|---------------------------------------|--------------|-----|
| UHF - High Power, Side Mount, basic slot antenna, 24 bay,, 75 kW input, directional,, horizontally polarized | \$42,615.00 | \$42,615.00 | Side mount antenna includes shipping. | \$42,128.80 | N/A |
| Sub-total | \$161,955.00 | \$87,374.00 | N/A | \$86,887.80 | N/A |
| Total for all systems | \$1,089,493.00 | \$859,909.00 | N/A | \$692,732.79 | N/A |

Components

| Actual Information | |
|--|--|
| Description | File Name |
| Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost) | Component Description: Primary Antenna - Pattern Scatter Analysis |
| | Amount: \$500.00 |
| | Component Description: Primary Antenna - Pattern Scatter Analysis |
| | Amount: \$2,500.00 |
| | Component Description: Primary Antenna Pattern Scatter Analysis |
| | Amount: \$2,000.00 |

| | | |
|--|-------------------------------|--|
| Side mount brackets for high power antennas (if not included in antenna base cost) | Component Description: | Primary Antenna - Side Mount Brackets |
| | Amount: | \$1,000.00 |
| | Component Description: | Primary Antenna - Side Mount Brackets |
| | Amount: | \$4,000.00 |
| | Component Description: | Additional work on tower for antenna mounting brackets modifications |
| | Amount: | \$4,989.00 |
| | Component Description: | Primary Antenna - Side Mount Brackets for Antenna |
| | Amount: | \$5,000.00 |
| New combiner, cost per channel (without antenna) | Component Description: | Primary Antenna - Combiner System |
| | Amount: | \$1,837.00 |
| | Component Description: | Primary Antenna - Combiner System |
| | Amount: | \$9,185.00 |
| | Component Description: | Primary Antenna Combiner System |
| | Amount: | \$7,348.00 |

| | |
|---|--|
| <p>Sweep test of existing antenna</p> | <p>Component Description: Primary Antenna - Sweep Test Amount: \$640.00</p> <p>Component Description: Primary Antenna - Sweep Test Amount: \$2,560.00</p> <p>Component Description: Primary Antenna - Sweep Test Amount: \$3,200.00</p> |
| <p>UHF - High Power, Side Mount, basic slot antenna, 24 bay,, 75 kW input, directional,, horizontally polarized</p> | <p>Component Description: Primary Antenna Amount: \$4,212.88</p> <p>Component Description: Primary Antenna Amount: \$16,851.52</p> <p>Component Description: Primary Antenna Amount: \$21,064.40</p> |

Cost Information

Transmission Line

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|---|-----------------------------|---------------------|---|---------------------|---------------------------|
| Primary Transmission Line | \$26,788.00 | \$22,000.00 | | \$17,544.11 | |
| Flexible Air Transmission Line - dielectric, 4" | \$26,788.00 | \$22,000.00 | Transmission line, mounting hardware and shipping | \$17,544.11 | N/A |
| Sub-total | \$26,788.00 | \$22,000.00 | N/A | \$17,544.11 | N/A |
| Total for all systems | \$1,089,493.00 | \$859,909.00 | N/A | \$692,732.79 | N/A |

Components

| Actual Information | |
|---|---|
| Description | File Name |
| Flexible Air Transmission Line - dielectric, 4" | Component Description: Primary Transmission Line |
| | Amount: \$1,754.41 |
| | Component Description: Primary Transmission Line |
| | Amount: \$8,772.06 |
| | Component Description: Primary Transmission Line |
| | Amount: \$7,017.64 |

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 | \$516,640.00 | \$339,340.00 | | \$339,340.00 | |
| Tower Rigging | <i>\$261,840.00</i> | \$261,840.00 | Please see uploaded cancellation and new Marsand quote 1802. Includes installation of 4" Heliac and wideband antenna and removal of 6-1/8" rigid coax and Ch 39 antenna. | \$261,840.00 | N/A |
| Structural engineering tower load study for well documented tower | \$12,600.00 | \$7,500.00 | N/A | \$7,500.00 | N/A |
| Short Tower (less than 500') | \$84,200.00 | \$20,000.00 | Crown Castle Lessor costs | \$20,000.00 | N/A |
| Minor tower reinforcement /modifications | \$158,000.00 | \$50,000.00 | N/A | \$50,000.00 | N/A |
| Sub-total | \$516,640.00 | \$339,340.00 | N/A | \$339,340.00 | N/A |

| | | | | | |
|------------------------------|----------------|--------------|-----|--------------|-----|
| Total for all systems | \$1,089,493.00 | \$859,909.00 | N/A | \$692,732.79 | N/A |
|------------------------------|----------------|--------------|-----|--------------|-----|

Components

| Actual Information | |
|--------------------|--|
| Description | File Name |
| Tower Rigging | <p>Component Description: Existing Primary Tower - Tower Rigging/Crew</p> <p>Amount: \$52,368.00</p> <p>Component Description: Existing Primary Tower - Tower Rigging/Crew</p> <p>Amount: \$190,672.00</p> <p>Component Description: Existing Tower - Tower Rigging /Crew</p> <p>Amount: \$18,800.00</p> |

| | |
|---|---|
| Structural engineering tower load study for well documented tower | <p>Component Description: Existing Primary Tower - Structural Engineering Load Study</p> <p>Amount: \$750.00</p> |
| | <p>Component Description: Existing Primary Tower - Structural Engineering Load Study</p> <p>Amount: \$3,000.00</p> |
| | <p>Component Description: Existing Tower - Structural Load Study</p> <p>Amount: \$3,750.00</p> |
| Short Tower (less than 500') | <p>Component Description: Existing Tower - Short Tower, Tower Equipment and Rigging Cost</p> <p>Amount: \$20,000.00</p> |

Minor tower reinforcement
/modifications

Component Description: Existing Primary
Tower - Minor
Tower
Reinforcement
/Modification
Amount: \$5,000.00

Component Description: Existing Tower -
Minor Tower
Reinforcement
/Modification
Amount: \$25,000.00

Component Description: Existing Primary
Tower - Minor
Tower
Reinforcement
/Modification
Amount: \$20,000.00

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 | \$150,310.00 | \$179,995.00 | | \$80,103.68 | |
| Project management of the transition | \$109,810.00 | \$144,675.00 | See Narrative and Widely quote. Prolonged management due to late phase, coordination and planning at congested site. | \$58,464.68 | N/A |
| Other Attorney Fees | <i>\$5,000.00</i> | \$5,000.00 | N/A | \$2,431.00 | N/A |
| Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet | \$10,520.00 | \$5,500.00 | 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 | \$156.00 | N/A |

| | | | | | |
|---|----------------|--------------|------------|--------------|-----|
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$5,000.00 | N/A | \$1,796.00 | N/A |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | \$1,500.00 | N/A |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | N/A | \$3,000.00 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$7,000.00 | N/A |
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$2,500.00 | N/A | \$2,500.00 | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$3,570.00 | Quote 1802 | \$3,256.00 | N/A |
| Sub-total | \$150,310.00 | \$179,995.00 | N/A | \$80,103.68 | N/A |
| Total for all systems | \$1,089,493.00 | \$859,909.00 | N/A | \$692,732.79 | N/A |

Components

| Actual Information Description | File Name |
|--------------------------------------|---|
| Project management of the transition | Component Description: Project Management Amount: \$2,277.50 |
| | Component Description: Project Management Amount: \$1,672.65 |
| | Component Description: Project Management Amount: \$2,251.65 |
| | Component Description: Project Management Amount: \$2,370.60 |
| | Component Description: Project Management Amount: \$4,047.50 |
| | Component Description: Project Management Amount: \$2,798.00 |
| | Component Description: Final Review and File of Form 387 Amount: \$78.00 |
| | Component Description: Project management Amount: \$5,069.58 |

Component Description: Project
Management
Amount: \$2,221.30

Component Description: Project
Management
Amount: \$4,726.55

Component Description: Project
Management
Amount: \$1,851.35

Component Description: Project
management
Amount: \$29,100.00

Other Attorney Fees

Component Description: Coordinate with engineer on completion of 2019 1Q and construction complete transition progress reports.
Amount: \$572.00

Component Description: Attorney Fees - Other Matters
Amount: \$78.00

Component Description: KSCE-590-Attorney Fees - Other Matters
Amount: \$182.00

Component Description: Review email from Mark Bishop re KSCE Crown Castle lease
Amount: \$234.00

Component Description: Legal services
Amount: \$1,053.00

Component Description: Load and partially complete 3Q 2018 transition progress report
Amount: \$156.00

Component Description: Legal services
Amount: \$156.00

| | | |
|--|---|--|
| <p>Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet</p> | <p>Information not provided.</p> | |
| <p>Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application</p> | <p>Component Description:</p> <p>Amount:</p> <p>Component Description:</p> <p>Amount:</p> | <p>Portion of Invoice attributable to Form 2100 Atty Fees \$1,718.00</p> <p>Load and complete initial drafts of KSCE license to cover application \$156.00</p> |
| <p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p> | <p>Component Description:</p> <p>Amount:</p> | <p>Review FCC Incentive Auction Closing Notice, Review channel reassignment notice; Load and prepare initial draft for Form 2100. \$1,796.00</p> |
| <p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p> | <p>Component Description:</p> <p>Amount:</p> | <p>RF Engineer - Prepare Engineering Section License to Cover Application \$1,500.00</p> |

| | |
|---|--|
| <p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p> | <p>Component Description: RF Engineer - Prepare Engineering Section of Construction Permit Application</p> <p>Amount: \$3,000.00</p> |
| <p>Perform engineering study for new channel assignment and antenna development</p> | <p>Component Description: RF Engineer - Engineering Study for New Channel Assignment</p> <p>Amount: \$7,000.00</p> |
| <p>Address transition timing and coordination issues w/ other stations and wireless</p> | <p>Component Description: Transition Timing and Coordination</p> <p>Amount: \$250.00</p> <p>Component Description: Transition Timing and Coordination</p> <p>Amount: \$1,250.00</p> <p>Component Description: Transition Timing and Coordination</p> <p>Amount: \$1,000.00</p> |

Prepare and or review
reimbursement form

Component Description: KSCE-590-Prepare
and Review
Reimbursement
Form
Amount: \$104.00

Component Description: Prepare and
Review
Reimbursement
Form
Amount: \$418.00

Component Description: Review, certify and
file Form 399 for
KSCE
Amount: \$78.00

Component Description: Review
Reimbursement
Form
Amount: \$2,500.00

Component Description: Review Form 399
filing
Amount: \$156.00

Component Description: Portion of Invoice
attributable to initial
submission of Form
399
Amount: \$496.00

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 | \$38,800.00 | \$36,200.00 | | \$23,822.20 | |
| MVPD Notification of Channel Change | <i>\$5,805.00</i> | \$5,805.00 | Marsand, Inc. Quote #1802 and Invoice #6983 | \$5,805.00 | N/A |
| Develop and air announcement of upcoming channel change | <i>\$5,000.00</i> | \$5,000.00 | N/A | N/A | N/A |
| Equipment Storage | <i>\$5,000.00</i> | \$5,000.00 | N/A | \$5,000.00 | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$10,000.00</i> | \$10,000.00 | N/A | \$10,000.00 | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$9,000.00 | N/A | \$3,017.20 | 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 - Form 2100 license to cover application | \$335.00 | \$325.00 | N/A | N/A | N/A |

| | | | | | |
|------------------------------|----------------|--------------|-----|--------------|-----|
| Sub-total | \$38,800.00 | \$36,200.00 | N/A | \$23,822.20 | N/A |
| Total for all systems | \$1,089,493.00 | \$859,909.00 | N/A | \$692,732.79 | N/A |

Components

| Actual Information | |
|--|---|
| Description | File Name |
| MVPD Notification of Channel Change | Component Description: MVPD Notification Amount: \$805.00 |
| | Component Description: MVPD Notification Amount: \$5,000.00 |
| Develop and air announcement of upcoming channel change | Information not provided. |
| Equipment Storage | Component Description: Equipment Storage Cost Amount: \$5,000.00 |
| | Component Description: Disposal Cost Amount: \$10,000.00 |
| Disposal Costs (for equipment and other waste, net of any salvage value) | Component Description: Disposal Cost Amount: \$10,000.00 |
| DTV Medical Facility Notification | Component Description: DTV notification service, notification of medical facilities Amount: \$2,887.20 |
| | Component Description: DTV Medical Notifications Amount: \$130.00 |

| | |
|--|---------------------------|
| FCC Filing Fees - Form 2100 minor change CP application | Information not provided. |
| FCC Filing Fees - Form 2100 license to cover application | Information not provided. |

Cost Information **Grand Total**

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|------------------------------|------------------------------------|-----------------------|--------------------|
| Total for all systems | \$1,089,493.00 | \$859,909.00 | \$692,732.79 |

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.

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.

Grace Rendall
*Vice-
President &
General
Manager*

07/01/2019

| Certification | Section | Question | Response |
|---------------|--|--|----------|
| | <p>Submission of Actual Cost Documentation Statements</p> | <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.

**Grace
Rendall**
*Vice-
President &
General
Manager*

07/01/2019

Attachments