



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **12033** | Service: **DTV** | Call **WWAY** | Channel: **24 (UHF)** |  
ID: | Sign:  
File **0000028249**  
Number:  
FRN: **0014489892** | Date **07/14**  
Submitted: **/2019**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>WWAY-TV, LLC</b> Doing Business As: WWAY-TV, LLC	Bobby Berry 301 Poplar Street MACON, GA 31201 United States	+1 (478) 745-4141	bberry@morrisnetwork.com	Limited Liability Company

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address	Phone	Email
<b>Ray Luke</b> <i>Project Manager</i> <i>Custom Specialty Services, LLC</i>	Ray Luke 17363 Carlton Cuebas Road Gulfport, MS 39503 United States	+1 (228) 297-2500	ray.css@att.net

**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		WWAY will work with WECT and WSFX-TV to repack the current shared combiner, antenna and transmission line. Each station will supply its own transmitter. WWAY and WECT own tower, RF Line, combiner, antenna and building 50/50.

**Transmitters**

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

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	Sigma
	Year	2003
	Type	Inductive Output Tube
	IOT Power Type	Single
	Power Capacity	32 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	ULXTE-40
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	25.3 kW
	Justification for New Transmitter	Old transmitter not supported and will not re-tune to new channel. While the Form 399 FAQ's instruct to list this as an upgrade, it actually is not, but rather a simple replacement. See attachment.

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
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<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	Yes
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	Yes
	Size	3 inches
	Length	150.0 feet
	Other Electrical Service	Yes
	Description	electrical power installation of transmitter, heat exchanger, pumps, transformer and breaker panels
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	Yes
	Type	Cooling Only
	Size	10 tons
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	Yes
	Size	2000.0 square feet
<b>Channel 14 Costs</b>	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
site survey	site survey for electrical drawing and floor plan
ice-bridge	ice bridge must have apx. 800sqf added to cover heat exchangers and HVAC equipment
STL Wave-Guide	STL must be moved to new transmitter room and wave-guide replaced

**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	Retune Existing
	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?	Yes
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	3
	Number of Panels	56
	Design power capacity in use	95.0 %
	Lower Limit	400.00 MHz

Upper Limit	600.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power) .....	1000.0 kW
Manufacturer	Andrew
Model	ABBP14H4- HTWC4-30? 54
Year	2003

**Facility ID's and Call Signs of  
all stations with whom the  
antenna is shared.**

Facility ID	Call Sign
72871	WSFX-TV
48666	WECT

**Primary  
Antenna**

**Adjustment to Existing Antenna**

Section	Question	Response
<b>Sweep Test of Existing Antenna</b>	Do you need a sweep test of existing antenna?	Yes

**Primary  
Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	Yes
	Type	New
	Number of channels supported	3
	Frequencies of channels supported	RF channel
	Frequency	N/A



**Enter a list of RF channel numbers.**

RF Channel Number
29
23
24

**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	Utilize Existing
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	
	Is Transmission Line in operating condition?	
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	
	Diameter	
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	
	Length	

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

Name	Description
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<b>RF line components</b>	RF line and components for connecting transmitter to combiner
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**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	Move Equipment
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	
	One or more FM, AM or TV radio broadcaster(s)	N/A
	Others Types of Users	N/A
	Is tower documented for structural analysis?	
	Is tower compliant with Rev G?	
Existing Tower Structure Registration	Do you have a tower registration number?	
	ASR Number	
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	- -
	Longitude (NAD83)	- -
	Overall Structure Height	
	Support Structure Height	
	Ground Elevation Above Mean Sea Level (AMSL)	
	Structure Type	-

	Tower Owner	
	Date Constructed	

**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
instalation of STL wave-guide	install wave-guide for STL link

**Outside  
Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	1050
	Explanation	station is one of a group of co-owned stations all of which are subject to repack, there is no director of engineering and station has only IT engineer on staff. Co-ordination is needed for the entire group's Transition in different phases of repack
<b>Outside RF consulting Engineering Services</b>	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
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	Yes

Number of Days	7
Justification	field testing on combined system

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Additional legal fees	Additional legal fees for 399 forms and progress reports



## Other Expenses

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	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
<b>Permit and Filing Costs</b>	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	Yes
<b>Other Miscellaneous Expenses</b>	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?	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

<b>Other Expenses</b>	<b>Other Expenses Not Listed</b>
	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
<b>Primary Transmitter ULXTE-40</b>	<b>\$1,161,201.40</b>	<b>\$982,835.83</b>		<b>\$836,713.49</b>	
STL Wave-Guide	<i>\$17,000.00</i>	\$17,000.00	STL must be moved to new transmitter room and wave-guide replaced including state taxes	\$15,885.35	N/A
ice-bridge	<i>\$9,437.40</i>	\$9,437.40	ice-bridge needed to protect new heat exchanger and HVAC equipment from falling ice	\$8,820.00	N/A
site survey	<i>\$0.00</i>	\$0.00	N/A	N/A	N/A
Other -- Building Addition Size: 2000.0	<i>\$14,792.00</i>	\$14,792.00	THIS IS REMODEL OF EXISTING ROOM AT TRANSMITTER SITE APX. 2000sf TO BE SHARED WITH WECT	\$7,396.00	N/A
10 Ton system	\$38,900.00	\$18,484.43	HVAC SYSTEM WITH STATE TAX ADDED	\$17,275.17	N/A

Other Electrical Service: electrical power installation of transmitter, heat exchanger, pumps, transformer and breaker panels	<b>\$48,122.00</b>	\$48,122.00	Electrical Service: electrical power installation of transmitter, heat exchanger, pumps, transformer and breaker panels	\$24,061.00	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$7,800.00	\$0.00	N/A	N/A	N/A
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$0.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$0.00	N/A	N/A	N/A
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$0.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$875,000.00	N/A	\$763,275.97	N/A
<b>Sub-total</b>	\$1,161,201.40	\$982,835.83	N/A	\$836,713.49	N/A
<b>Total for all systems</b>	\$1,682,417.10	\$1,520,130.53	N/A	\$1,002,735.37	N/A

## Components

Actual Information		
Description	File Name	
STL Wave-Guide	<b>Component Description:</b>  <b>Amount:</b>	Wave-guide to move STL to new transmitter location  \$15,885.35
ice-bridge	<b>Component Description:</b>  <b>Amount:</b>	WWAY IS A COMBINED SITE AND WECT WILL PAY OTHER HALF OF INVOICE  \$8,820.00
site survey	Information not provided.	
Other -- Building Addition Size: 2000.0	<b>Component Description:</b>  <b>Amount:</b>	BUILDING MODS SPLIT WITH WECT with letter from THTV added  \$7,396.00
10 Ton system	<b>Component Description:</b>  <b>Amount:</b>	10 ton HVAC system installed  \$17,275.17
Other Electrical Service: electrical power installation of transmitter, heat exchanger, pumps, transformer and breaker panels	<b>Component Description:</b>  <b>Amount:</b>	Revised 50% progress billing  \$24,061.00
3" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Transformer 3 phase/480v - 150 KVA	Information not provided.	

Switchgear - industrial 800 amp	Information not provided.	
Service entrance 3 phase /800 amp/208 volt	Information not provided.	
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	<b>Component Description:</b>  <b>Amount:</b>	final transmitter payment less install and freight \$242,838.36
	<b>Component Description:</b>  <b>Amount:</b>	1/3 payment due to ship transmitter this is 2nd transmitter payment \$257,837.85
	<b>Component Description:</b>  <b>Amount:</b>	1/3 down payment on transmitter \$262,599.76
	<b>Component Description:</b>  <b>Amount:</b>	Quote from Gates and station PO N/A

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 ABBP14H4- HTWC4- 30?54	\$96,190.00	\$137,559.00		\$60,616.22	
Pattern scatter analysis for side mount high /med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	N/A	N/A

New combiner, cost per channel (without antenna)	\$84,200.00	\$126,159.00	This cost is above catalog because the channel combiner, mask filter and load are shared by 3 stations, but owned by 2, and by contract cost for 3 is split 2 ways. Tax and shipping still to be added See attached ERI letter of explanation.	\$60,616.22	You will see that the repack combiner, building, and tower expense estimates for stations WWAY and WECT are split two ways. These two stations are partners in Brunswick Tower LLC which owns the tower, building, antennas, line,
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
<b>Sub-total</b>	\$96,190.00	\$137,559.00	N/A	\$60,616.22	N/A
<b>Total for all systems</b>	\$1,682,417.10	\$1,520,130.53	N/A	\$1,002,735.37	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)	Information not provided.
New combiner, cost per channel (without antenna)	



<b>Component Description:</b>	3-Channel Combiner, Please see ERI letter of explanation of cost, attached hereto. Total cost for 3 stations is divided 2 ways by contractual obligation. WWAY is responsible \$117,437.50 this invoice is for WWAY 50% deposit tax and shipping added at end
<b>Amount:</b>	\$58,718.75

<b>Component Description:</b>	ERI Justification letter for Invoice # WWAY-001
<b>Amount:</b>	N/A

<b>Component Description:</b>	Tower Lease agreement
<b>Amount:</b>	N/A

<b>Component Description:</b>	ERI proposal for 3 station combiner cost paid by WWAY and WECT 50/50 split each station
<b>Amount:</b>	N/A

<b>Component Description:</b>	ERI Technical Proposal for WWAY, WECT and WSFX
<b>Amount:</b>	N/A

	<div><div><b>Component Description:</b></div><div><b>Amount:</b></div></div> <div>50% down payment for combiner hardware \$1,897.47</div>
	<div><div><b>Component Description:</b></div><div><b>Amount:</b></div></div> <div>WSFX lease Agreement with WWAY and WECT N/A</div>
Sweep test of existing antenna	Information not provided.

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	\$38,030.70	\$38,030.70		\$19,015.35	
RF line components	<i>\$38,030.70</i>	\$38,030.70	RF LINE COMPONENTS NEEDED TO CONNECT TRANSMITTERS TO COMBINER. INVOICE WILL BE SPLIT WITH WECT	\$19,015.35	N/A
Sub-total	\$38,030.70	\$38,030.70	N/A	\$19,015.35	N/A
Total for all systems	\$1,682,417.10	\$1,520,130.53	N/A	\$1,002,735.37	N/A

Components

Actual Information	
Description	File Name
RF line components	<div><div>Component Description:</div><div>INVOICE TO CONNECT TRANSMITTERS TO COMBINER . this is 50% of WWAY'S down payment due with order</div><div>Amount:</div><div>\$19,015.35</div></div>

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	\$19,500.00	\$19,500.00		\$0.00	
instalation of STL wave-guide	<i>\$19,500.00</i>	\$19,500.00	TOWER CREW TO INSTALL EW63 WAVE-GUIDE FOR STL LINK	N/A	N/A
Sub-total	\$19,500.00	\$19,500.00	N/A	\$0.00	N/A
Total for all systems	\$1,682,417.10	\$1,520,130.53	N/A	\$1,002,735.37	N/A

Components

Information not provided.

Cost  
Information

Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$323,570.00	\$307,750.00		\$83,320.31	
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	\$675.00	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	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$165,900.00	\$157,500.00	N/A	\$79,649.07	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$1,769.99	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	\$1,226.25	N/A
Additional legal fees	<b>\$8,500.00</b>	\$8,500.00	N/A	N/A	N/A

Additional Field Engineering Service, 7 Days	<b>\$9,000.00</b>	\$9,000.00	Additional Field Engineering Service, 7 Days for tuning of combiner	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$323,570.00	\$307,750.00	N/A	\$83,320.31	N/A
<b>Total for all systems</b>	\$1,682,417.10	\$1,520,130.53	N/A	\$1,002,735.37	N/A

## Components

Actual Information	
Description	File Name
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.

<p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="697 100 1114 533"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 100 1428 533"> <p>Provided legal advice as to required preparation of Form 2100 and required timing of same.</p> <p>\$112.50</p> </td></tr> <tr> <td data-bbox="697 533 1114 1205"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 533 1428 1205"> <p>Legal advice and assistance in preparing and filing FCC Form 2100; fees billed in prior months and service charges omitted from this reimbursement request and reimbursement for other elements requested separately.</p> <p>\$562.50</p> </td></tr> </table>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Provided legal advice as to required preparation of Form 2100 and required timing of same.</p> <p>\$112.50</p>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Legal advice and assistance in preparing and filing FCC Form 2100; fees billed in prior months and service charges omitted from this reimbursement request and reimbursement for other elements requested separately.</p> <p>\$562.50</p>
<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Provided legal advice as to required preparation of Form 2100 and required timing of same.</p> <p>\$112.50</p>				
<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Legal advice and assistance in preparing and filing FCC Form 2100; fees billed in prior months and service charges omitted from this reimbursement request and reimbursement for other elements requested separately.</p> <p>\$562.50</p>				
<p>Prepare request for Special Temporary Authorization</p>	<p>Information not provided.</p>				
<p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>				
<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<p>Information not provided.</p>				
<p>Perform engineering study for new channel assignment and antenna development</p>	<p>Information not provided.</p>				
<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<p>Information not provided.</p>				



Project management of the transition

<b>Component Description:</b>	Jan. 2019 CSS invoice 19-0104
<b>Amount:</b>	\$6,856.31
<b>Component Description:</b>	APR 2018 PROJECT MANAGEMENT INVOICE
<b>Amount:</b>	\$1,462.50
<b>Component Description:</b>	DEC. 2017 for project management hours
<b>Amount:</b>	\$1,687.50
<b>Component Description:</b>	REVISED CSS PROJECT MANAGEMENT INVOICE JUNE 2017
<b>Amount:</b>	\$5,101.05
<b>Component Description:</b>	PROJECT MANAGEMENT INVOICE
<b>Amount:</b>	\$1,537.50
<b>Component Description:</b>	PROJECT MANAGEMENT INVOICE
<b>Amount:</b>	\$1,800.00
<b>Component Description:</b>	CSS March 2019 invoice
<b>Amount:</b>	\$16,210.21

<b>Component Description:</b>	CSS April 2019 invoice
<b>Amount:</b>	\$1,725.00
<b>Component Description:</b>	Jan. 2018 invoice for project management hours
<b>Amount:</b>	\$1,575.00
<b>Component Description:</b>	PROJECT MANAGEMENT INVOICE
<b>Amount:</b>	\$862.50
<b>Component Description:</b>	NOV. 2017 invoice for project management hours
<b>Amount:</b>	\$8,325.00
<b>Component Description:</b>	JULY 2017 PROJECT MANAGEMENT INVOICE
<b>Amount:</b>	\$2,133.00
<b>Component Description:</b>	project management invoice Oct .2018
<b>Amount:</b>	\$1,237.50
<b>Component Description:</b>	MAY 2018 PROJECT MANAGEMENT INVOICE
<b>Amount:</b>	\$562.50

<b>Component Description:</b>	OCT. 2017 invoice for project management hours
<b>Amount:</b>	\$2,475.00

<b>Component Description:</b>	CSS PROJECT MANAGEMENT INVOICE MAY 2017
<b>Amount:</b>	\$3,235.50

<b>Component Description:</b>	Project Management invoice Nov. 2018
<b>Amount:</b>	\$1,312.50

<b>Component Description:</b>	MAR 2018 PROJECT MANAGEMENT INVOICE
<b>Amount:</b>	\$3,637.50

<b>Component Description:</b>	CSS PROJECT MANAGEMENT INVOICE APRIL 2017 REV.
<b>Amount:</b>	\$2,662.50

<b>Component Description:</b>	PROJECT MANAGEMENT INVOICE
<b>Amount:</b>	\$1,933.50

<b>Component Description:</b>	FEB 2018 INVOICE FOR PROJECT MANAGEMENT HOURS
<b>Amount:</b>	\$7,425.00

<b>Component Description:</b>	Feb. 2019 CSS Invoice 19-0204
<b>Amount:</b>	\$2,400.00

<b>Component Description:</b>	PROJECT MANAGEMENT INVOICE SEPT 2018
<b>Amount:</b>	\$262.50

<b>Component Description:</b>	SEPT 2017 PROJECT MANAGEMENT INVOICE
<b>Amount:</b>	\$405.00

<b>Component Description:</b>	Project Management invoice Dec. 2018
<b>Amount:</b>	\$2,025.00

<b>Component Description:</b>	AUG 2017 PROJECT MANAGEMENT INVOICE
<b>Amount:</b>	\$799.50

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Prepare and or review  
reimbursement form

**Component Description:**

Legal services in connection with providing further information related to FCC Form 1876 and figuring out apparently inconsistent information; fees billed in prior months and service charges omitted from this reimbursement request.

**Amount:**

\$540.00

**Component Description:**

Legal fees and costs for preparing and submitting FCC Form 1876 to obtain reimbursement of expenses.

**Amount:**

\$464.99

**Component Description:**

Provided legal advice as to information needed and timing required for cost reimbursement forms.

**Amount:**

\$112.50

	<p><b>Component Description:</b></p> <p>Legal fees for preparation and filing of Schedule 399 and obtaining necessary information; fees billed in prior months and service charges omitted from this reimbursement request.</p> <p><b>Amount:</b></p> <p>\$652.50</p>
Attorney Fees - Negotiation of lease and other matters for shared locations	Information not provided.
Attorney Fees - Prepare and File request for Special Temporary Authorization	<p><b>Component Description:</b></p> <p>Provided legal information and advise regarding grant of STA for transition phase change.</p> <p><b>Amount:</b></p> <p>\$112.50</p> <p><b>Component Description:</b></p> <p>Legal fees in connection with preparation and filing of STA request for change in transition phase. Prior month's charges and courtesy discount omitted from reimbursement request.</p> <p><b>Amount:</b></p> <p>\$1,113.75</p>
Additional legal fees	Information not provided.

Additional Field Engineering Service, 7 Days	Information not provided.
RF Exposure Measurements	Information not provided.
Comprehensive coverage verification via field study, if needed	Information not provided.

## Cost Information

### Other Expenses

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$43,925.00</b>	<b>\$34,455.00</b>		<b>\$3,070.00</b>	
MVPD Notification of Channel Change	<i>\$935.00</i>	\$935.00	N/A	\$935.00	N/A
Develop and air announcement of upcoming channel change	<i>\$300.00</i>	\$300.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$19,500.00</i>	\$19,500.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$10,000.00</i>	\$10,000.00	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	\$2,135.00	N/A	\$2,135.00	N/A



FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A
<b>Sub-total</b>	\$43,925.00	\$34,455.00	N/A	\$3,070.00	N/A
<b>Total for all systems</b>	\$1,682,417.10	\$1,520,130.53	N/A	\$1,002,735.37	N/A

## Components

Actual Information	
Description	File Name
MVPD Notification of Channel Change	<p><b>Component Description:</b> WWAY MVPD Notification invoice</p> <p><b>Amount:</b> \$935.00</p>
Develop and air announcement of upcoming channel change	Information not provided.
Equipment Delivery and Handling Charges	Information not provided.
Disposal Costs (for equipment and other waste, net of any salvage value)	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	<p><b>Component Description:</b> WWAY Medical Notification invoice</p> <p><b>Amount:</b> \$2,135.00</p>
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.



<b>Cost Information</b>	<b>Grand Total</b>		
		<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>
			<b>Actual Cost</b>
	<b>Total for all systems</b>	\$1,682,417.10	\$1,520,130.53
			\$1,002,735.37

<b>Reimbursement Status</b>	<b>Question</b>	<b>Response</b>
	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"> <li>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.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>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.</li> </ol>	

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.

**Bobby  
Berry**  
*Chief  
Operating  
Officer*

07/14/2019

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"> <li>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.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	

4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD) .
6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.



<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Bobby Berry</b>  <i>Chief Operating Officer</i></p> <p>07/14/2019</p>

## Attachments