



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **51101** | Service: **DTV** | Call **KOZJ** | Channel: **35 (UHF)** |  
ID: | Sign:  
File **0000027873**  
Number:  
FRN: **0002487056** | Date **01/15**  
Submitted: **/2020**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>BOARD OF GOVERNORS OF MISSOURI STATE UNIVERSITY</b> Doing Business As: <b>BOARD OF GOVERNORS OF MISSOURI STATE UNIVERSITY</b>	Rachel Knight 901 S. NATIONAL AVE. SPRINGFIELD, MO 65897 United States	+1 (417) 836-5878	RACHELKNIGHT@MISSOURISTATE.EDU	Government Entity

## 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
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<b>Matthew Anderson Sanderford , Jr. .</b>	Matthew Sanderford	+1 (817) 783-5566	engineering@marsand.com
<i>President</i>	211 Pack		
<i>Marsand, Inc. 211 Pack Saddle Trail Weatherford, TX 76088-8646</i>	Saddle Trail Weatherford, TX 76088		
	United States		

# **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	See attached station transition plan.

# **Transmitters**

Section	Question	Response
<b>Transmitter Related Expenses</b>	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	DHD20P1
	Year	2003
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	5.5 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	ULXTE-10
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	6.6 kW
	Justification for New Transmitter	Existing transmitter manufacturer will not support retuning to new channel and current transmitter does not have sufficient output power.

**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
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	Yes
	Type	Heating and Cooling
	Size	5 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	0.0 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**  
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
<b>Existing Antenna Description</b>	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
<b>Existing Antenna Manufacturer and Type</b>	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) .....	55.0 kW

Manufacturer	
Model	B16UOM
Year	1984

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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?	No
	Will antenna be located on or in close proximity to an antenna farm?	No
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	16
	Lower Limit	500.00 MHz
	Upper Limit	626.00 MHz
	Design power capacity in use	59.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	68.0 kW
	Manufacturer	

Model	RD-16RFS (OM) -500626-SL
Year	2017
Justification for New Antenna	Existing CH25 antenna will not support CH35. Broadband replacement allows reuse of existing aperture and main transmission line run with no structural modification.

**Primary  
Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Broadband
	Feed Line Size	3 1/8 inches inches

<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	Yes
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Transmission Line**

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	No

**Tower Equipment And Rigging Costs**

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

**Primary Tower****Add 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?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1012933
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	37° 04' 34.9" N-
	Longitude (NAD83)	094° 32' 16.4" W-
	Overall Structure Height	981.94 feet
	Support Structure Height	980.96 feet

Ground Elevation Above Mean Sea Level (AMSL)	1042.97 feet
Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	SpectraSite Communications, LLC. through American Towers, LLC.
Date Constructed	01/01/1965

**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
18283	KODE-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 undocumented /poorly documented tower
Tower Reinforcements	Please select whether tower reinforcements are needed:	Serious Reinforcements needed

## Primary Tower

### Tower Rigging Costs

Section	Question	Response
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<b>Tower Rigging Costs</b>	Complex Tower	N/A
<b>Helicopter Services Required</b>	Are helicopter services required?	No

**Primary  
Tower**

**Other Tower Expenses Not Listed**

<b>Name</b>	<b>Description</b>
<b>Tower Permit Drawing Package</b>	Tower owner required generation of a construction drawing package
<b>Ground and Building AE Permit Drawing Package</b>	Tower owner required generation of a construction drawing package
<b>Antenna Change Out</b>	Cost for removing old antenna and install new antenna
<b>Structural Engineering Tower Load Study</b>	Tower owner required Rigorous Structural analysis

**Outside  
Professional**

Section	Question	Response
<b>Services Costs Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	100
	Explanation	The station has multiple transmitter sites (2 TV) and operates with minimal staff. It does not have personnel available for any of these tasks, nor is the staff trained to provide any of these services.
<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	No
	Quantity	N/A

	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	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	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	No
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A



	Justification	N/A
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Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Site Survey	Site visit for specifying the final equipment needs and installation planning.
Tower Owner Project Managment	Tower owner required project management.

## 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	No
	FCC License to Cover Application	No
	FCC Special Temporary Authority Application	No
<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?	No
	Does this relocation require Equipment Storage?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

**Other  
Expenses**

**Other Expenses Not Listed**

Name	Description
<b>Required bid advertising</b>	State of Missouri statutes require advertising for projects/equipment with a value of \$100,000 or greater.
<b>Receive Equipment to Monitor Signal</b>	Updated receive equipment needed to monitor signal at main studios
<b>Professional Services for Transmitter Building Improvements</b>	Oversight of design development, construction documents, bidding and construction administration.

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 ULXTE-10	\$710,879.35	\$377,323.88		\$238,744.87	
Other -- Building Addition Size: 0.0	<i>\$13,865.00</i>	\$13,865.00	Access Door required to allow personnel access between the transmitter room and the new transmitter heat exchanger located outside. Costs exceeded original estimates. See attached documentation for actual costs.	\$13,865.00	N/A

Other -- HVAC Service Type: H Size:5 (Other)	<b>\$25,546.00</b>	\$25,546.00	Current HVAC requires too much space to locate new transmitter's outdoor heat exchanger. This space is limited. HVAC to be replaced with smaller outdoor unit to allow sufficient area for transmitter exchanger. Actual costs exceeded original estimates.	\$25,546.00	N/A
UHF - Liquid Cooled Solid State Transmitter 6.6 kW	<b>\$176,968.35</b>	\$176,968.35	Cost is reflective of actual expenses incurred. See cost component for detailed memo and supporting documentation.	\$176,968.35	N/A
UHF - Liquid Cooled Solid State Transmitter 8.2 - 13 kW	\$494,500.00	\$160,944.53	***System Notice: Estimate adjusted and locked because line has been superseded. ***Final quote not received. Maximum estimate used in its place.	\$22,365.52	N/A
<b>Sub-total</b>	\$710,879.35	\$377,323.88	N/A	\$238,744.87	N/A
<b>Total for all systems</b>	\$2,288,047.98	\$1,210,361.81	N/A	\$898,088.07	N/A

## Components

Actual Information	
Description	File Name
Other -- Building Addition Size: 0.0	<b>Component Description:</b> Portion of bill for Access Door.
	<b>Amount:</b> \$13,865.00
Other -- HVAC Service Type: H Size:5 (Other)	<b>Component Description:</b> Portion of invoice for HVAC related work.
	<b>Amount:</b> \$25,546.00
UHF - Liquid Cooled Solid State Transmitter 6.6 kW	<b>Component Description:</b> Portion of bill for transmitter installation, proof, and freight.
	<b>Amount:</b> \$38,389.34
	<b>Component Description:</b> Costs for transmitter and component parts.
	<b>Amount:</b> \$138,579.01

UHF - Liquid Cooled Solid  
State Transmitter 8.2 - 13  
kW

**Component Description:**

Costs for  
transmitter  
components.

**Amount:**

\$1,961.74

**Component Description:**

Costs for  
transmitter and  
component parts.

**Amount:**

\$138,579.01

**Component Description:**

Costs for  
transmitter  
components.

**Amount:**

\$20,403.78

## 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
<b>Primary Antenna RD-16RFS (OM) -500626-SL</b>	<b>\$80,587.16</b>	<b>\$77,802.46</b>		<b>\$66,402.46</b>	
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
Elbow complex, broadband, at antenna input, per 3 1/8. feedline (if needed)	\$9,340.00	\$7,145.30	As final needs were developed on antenna related components, there was some cost variance from initial 399 estimates which relied on FCC catalog pricing.	\$7,145.30	As final needs were developed, we saw some cost variance from original estimates for needed components.



UHF - High Power, Side Mount, basic slot antenna, 16 bay,, 68 kW input, horizontally polarized	<b>\$59,257.16</b>	\$59,257.16	As final antenna needs were developed, there was some cost variance from initial 399 estimates which relied on FCC catalog pricing.	\$59,257.16	As final antenna needs were developed, there was some cost variance from initial 399 estimates which relied on FCC catalog pricing.
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
<b>Sub-total</b>	\$80,587.16	\$77,802.46	N/A	\$66,402.46	N/A
<b>Total for all systems</b>	\$2,288,047.98	\$1,210,361.81	N/A	\$898,088.07	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.
Elbow complex, broadband, at antenna input, per 3 1/8. feedline (if needed)	<p><b>Component Description:</b> Portion of bill for antenna-related transmission line components.</p> <p><b>Amount:</b> \$7,145.30</p>
UHF - High Power, Side Mount, basic slot antenna, 16 bay,, 68 kW input, horizontally polarized	<p><b>Component Description:</b> Portion of bill for antenna</p> <p><b>Amount:</b> \$59,257.16</p>

Sweep test of existing antenna	Information not provided.
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**Cost Information**      **Transmission Line**  
Information not provided.

**Cost Information**      **Tower Equipment and Rigging Costs**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower	\$1,393,650.00	\$633,964.00		\$540,314.00	
G TOWER					
Serious tower reinforcement /modifications	\$1,052,000.00	\$512,769.00	Estimated cost has been adjusted to reflect the actual charges incurred when implementing the tower modifications.	\$512,769.00	N/A
Ground and Building AE Permit Drawing Package	<i>\$4,700.00</i>	\$4,700.00	Cost estimate provided by tower owner.	\$750.00	N/A
Structural Engineering Tower Load Study	<i>\$10,450.00</i>	\$10,450.00	Cost to KOZJ increased due to the fact that the other tenant on the tower (KODE) decided it will vacate to another tower site.	\$10,450.00	N/A

Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$16,345.00	Cost to KOZJ increased due to the fact the other tenant on the tower KODE decided it will vacate to another tower site.	\$16,345.00	N/A
Antenna Change Out	<b>\$85,000.00</b>	\$85,000.00	Quote attached from PCI	N/A	N/A
Tower Permit Drawing Package	<b>\$4,700.00</b>	\$4,700.00	Cost estimate provided by tower owner.	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$0.00	Tower Rigging cost is include in the tower owner's estimate reinforcement / modifications.	N/A	N/A
<b>Sub-total</b>	\$1,393,650.00	\$633,964.00	N/A	\$540,314.00	N/A
<b>Total for all systems</b>	\$2,288,047.98	\$1,210,361.81	N/A	\$898,088.07	N/A

## Components

**Actual Information**  
**Description**

**File Name**

Serious tower reinforcement /modifications	<b>Component Description:</b>	Final true-up payment for construction /modification costs.
	<b>Amount:</b>	\$146,304.75
	<b>Component Description:</b>	Second payment for structural modifications.
	<b>Amount:</b>	\$244,309.50
	<b>Component Description:</b>	First Payment for construction /modification costs
	<b>Amount:</b>	\$122,154.75
Ground and Building AE Permit Drawing Package	<b>Component Description:</b>	Building Permit for modifications of ATC owned tower.
	<b>Amount:</b>	\$750.00
Structural Engineering Tower Load Study	<b>Component Description:</b>	Charges for structural engineering tower load study
	<b>Amount:</b>	\$10,450.00
Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study	<b>Component Description:</b>	Charges for required tower mapping
	<b>Amount:</b>	\$16,345.00
Antenna Change Out	Information not provided.	
Tower Permit Drawing Package	Information not provided.	

Tall Tower (greater than 500')	Information not provided.
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## 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
<b>Outside Professional Services</b>	<b>\$61,840.00</b>	<b>\$80,730.00</b>		<b>\$34,086.52</b>	
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$6,161.27	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$1,339.50	N/A
Project management of the transition	\$15,800.00	\$15,000.00	N/A	\$9,399.25	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$2,250.00	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

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$580.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	\$1,005.50	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$25,000.00	After consultation with legal counsel, the station is estimating lease negotiation costs of \$25,000 for amending the current site lease with ATC and for negotiating a Master Agreement with ATC relating to the overall tower changes necessary for the station's repack.	\$3,871.00	N/A
Site Survey	<b>\$10,000.00</b>	\$10,000.00	N/A	N/A	N/A
Tower Owner Project Managment	<b>\$9,480.00</b>	\$9,480.00	Cost provided by tower owner	\$9,480.00	N/A



<b>Sub-total</b>	\$61,840.00	\$80,730.00	N/A	\$34,086.52	N/A
<b>Total for all systems</b>	\$2,288,047.98	\$1,210,361.81	N/A	\$898,088.07	N/A

## Components

Actual Information Description	File Name	
Perform engineering study for new channel assignment and antenna development	<b>Component Description:</b>	Portion of bill for Engineering Study. Invoice date entry corrected per FCC inquiry.
	<b>Amount:</b>	\$4,500.00
	<b>Component Description:</b>	Engineering Services for channel assignment and antenna development . Requested amount updated per FCC inquiries.
	<b>Amount:</b>	\$1,661.27

<p>Prepare and or review reimbursement form</p>	<table> <tr> <td data-bbox="707 98 1114 405"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 98 1426 405"> <p>Prepare or review reimbursement form.</p> <p>\$97.00</p> </td></tr> <tr> <td data-bbox="707 405 1114 801"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 405 1426 801"> <p>Prepare or review reimbursement form. Invoice attachment provides additional support per FCC inquiry.</p> <p>\$588.50</p> </td></tr> <tr> <td data-bbox="707 801 1114 1059"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 801 1426 1059"> <p>Prepare or review reimbursement form.</p> <p>\$654.00</p> </td></tr> </table>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Prepare or review reimbursement form.</p> <p>\$97.00</p>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Prepare or review reimbursement form. Invoice attachment provides additional support per FCC inquiry.</p> <p>\$588.50</p>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Prepare or review reimbursement form.</p> <p>\$654.00</p>
<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Prepare or review reimbursement form.</p> <p>\$97.00</p>						
<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Prepare or review reimbursement form. Invoice attachment provides additional support per FCC inquiry.</p> <p>\$588.50</p>						
<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Prepare or review reimbursement form.</p> <p>\$654.00</p>						
<p>Project management of the transition</p>	<table> <tr> <td data-bbox="707 1059 1114 1344"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 1059 1426 1344"> <p>Portion of bill for KOZJ Project Management</p> <p>\$97.00</p> </td></tr> <tr> <td data-bbox="707 1344 1114 1628"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 1344 1426 1628"> <p>Legal Fees for Project Management</p> <p>\$388.00</p> </td></tr> <tr> <td data-bbox="707 1628 1114 2134"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 1628 1426 2134"> <p>Legal Fees for Project Management</p> <p>\$423.00</p> </td></tr> </table>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Portion of bill for KOZJ Project Management</p> <p>\$97.00</p>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Legal Fees for Project Management</p> <p>\$388.00</p>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Legal Fees for Project Management</p> <p>\$423.00</p>
<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Portion of bill for KOZJ Project Management</p> <p>\$97.00</p>						
<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Legal Fees for Project Management</p> <p>\$388.00</p>						
<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Legal Fees for Project Management</p> <p>\$423.00</p>						

<b>Component Description:</b>	Portion of bill for Project Management- KOZJ
<b>Amount:</b>	\$237.50

<b>Component Description:</b>	Legal fees for Project Management
<b>Amount:</b>	\$5,222.00

<b>Component Description:</b>	Project Management Costs
<b>Amount:</b>	\$194.00

<b>Component Description:</b>	Legal Project Management Fees
<b>Amount:</b>	\$409.50

<b>Component Description:</b>	Portion of the bill for KOZJ Project Management
<b>Amount:</b>	\$54.00

<b>Component Description:</b>	Portion of bill for Preliminary Project Management. Invoice updated per FCC inquiries.
<b>Amount:</b>	\$2,500.00

<b>Component Description:</b>	Legal Project Management Fees
<b>Amount:</b>	\$48.50

<b>Component Description:</b>	Portion of bill for project management.
<b>Amount:</b>	\$48.50

<b>Component Description:</b>	Project Management Services.
<b>Amount:</b>	\$523.00

<b>Component Description:</b>	Project management services.
<b>Amount:</b>	\$145.50

<b>Component Description:</b>	Portion of the bill for KOZJ Project Management
<b>Amount:</b>	\$24.25

<b>Component Description:</b>	Legal Project Management Fees
<b>Amount:</b>	\$436.50

<b>Component Description:</b>	Legal fees for Project Management
<b>Amount:</b>	\$194.00

<b>Component Description:</b>	Legal Fees for Project Management
<b>Amount:</b>	\$630.50

<b>Component Description:</b>	Legal Fees for Project Management.
<b>Amount:</b>	\$1,811.00

	<p><b>Component Description:</b></p> <p>Portion of the bill for legal project management fees.</p> <p><b>Amount:</b></p> <p>\$145.50</p>
	<p><b>Component Description:</b></p> <p>Legal Fees for Project Management</p> <p><b>Amount:</b></p> <p>\$2,900.00</p>
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<p><b>Component Description:</b></p> <p>Portion of bill for engineering section of CP application. Invoice updated per FCC inquiry.</p> <p><b>Amount:</b></p> <p>\$2,250.00</p>
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<p><b>Component Description:</b></p> <p>Legal Fees for Construction Permit application</p> <p><b>Amount:</b></p> <p>\$580.00</p>
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	<p><b>Component Description:</b></p> <p>Legal fees associated with the License to Cover Application</p> <p><b>Amount:</b></p> <p>\$1,005.50</p>

Attorney Fees - Negotiation of lease and other matters for shared locations	<b>Component Description:</b>  <b>Amount:</b>	Review of Tower Master Services Agreement \$864.00
	<b>Component Description:</b>  <b>Amount:</b>	Review of shared site issues. \$436.50
	<b>Component Description:</b>  <b>Amount:</b>	Review of shared site issues \$242.50
	<b>Component Description:</b>  <b>Amount:</b>	Portion of bill for review of shared site issues. \$1,455.00
	<b>Component Description:</b>  <b>Amount:</b>	Review of shared site issues. \$339.50
	<b>Component Description:</b>  <b>Amount:</b>	Review of Tower Master Services Agreement \$242.50
	<b>Component Description:</b>  <b>Amount:</b>	Review of shared site issues. \$291.00
Site Survey	Information not provided.	

Tower Owner Project Managment	<table><tr><td data-bbox="707 174 1015 210"><b>Component Description:</b></td><td data-bbox="1150 174 1310 327">Tower Owner Project Management Services</td></tr><tr><td data-bbox="707 338 815 367"><b>Amount:</b></td><td data-bbox="1150 338 1267 367">\$9,480.00</td></tr></table>	<b>Component Description:</b>	Tower Owner Project Management Services	<b>Amount:</b>	\$9,480.00
<b>Component Description:</b>	Tower Owner Project Management Services				
<b>Amount:</b>	\$9,480.00				

## 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
<b>Other Expenses</b>	<b>\$41,091.47</b>	<b>\$40,541.47</b>		<b>\$18,540.22</b>	
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$2,520.25	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$2,000.00</i>	\$2,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$1,000.00</i>	\$1,000.00	Spot creation, talent, production.	N/A	N/A
MVPD Notification of Channel Change	<i>\$11,000.00</i>	\$11,000.00	Send notification to cable companies, MVPD locations, follow up on signal reception after repack switch.	\$1,430.55	N/A



Required bid advertising	<b>\$1,500.00</b>	\$1,500.00	State of Missouri statutes require advertising for projects /equipment with a value of \$100,000 or greater.	\$1,347.95	N/A
Receive Equipment to Monitor Signal	<b>\$1,241.47</b>	\$1,241.47	N/A	\$1,241.47	N/A
Professional Services for Transmitter Building Improvements	<b>\$12,800.00</b>	\$12,800.00	N/A	\$12,000.00	N/A
<b>Sub-total</b>	\$41,091.47	\$40,541.47	N/A	\$18,540.22	N/A
<b>Total for all systems</b>	\$2,288,047.98	\$1,210,361.81	N/A	\$898,088.07	N/A

## Components

Actual Information	
Description	File Name
DTV Medical Facility Notification	<b>Component Description:</b> Required Medical Facility Notifications <b>Amount:</b> \$2,520.25
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.

MVPD Notification of Channel Change	<div> <div>Component Description:</div> <div>Required MVPD Notifications</div> </div> <div> <div>Amount:</div> <div>\$1,430.55</div> </div>
Required bid advertising	<div> <div>Component Description:</div> <div>KOZJ portion of ads for bid process for transmitter purchases.</div> </div> <div> <div>Amount:</div> <div>\$165.02</div> </div> <div> <div>Component Description:</div> <div>KOZJ portion of ads for bid process for transmitter purchases.</div> </div> <div> <div>Amount:</div> <div>\$236.25</div> </div> <div> <div>Component Description:</div> <div>KOZJ portion of ads for bid process for transmitter purchases.</div> </div> <div> <div>Amount:</div> <div>\$14.50</div> </div> <div> <div>Component Description:</div> <div>KOZJ portion of ads for bid process for transmitter purchases.</div> </div> <div> <div>Amount:</div> <div>\$14.50</div> </div> <div> <div>Component Description:</div> <div>KOZJ portion of ads for bid process for transmitter purchases.</div> </div> <div> <div>Amount:</div> <div>\$587.64</div> </div>

	<b>Component Description:</b>	KOZJ portion of ads for bid process for transmitter purchases.
	<b>Amount:</b>	\$165.02
	<b>Component Description:</b>	KOZJ portion of ads for bid process for transmitter purchases.
	<b>Amount:</b>	\$165.02
Receive Equipment to Monitor Signal	<b>Component Description:</b>	Receive Equipment to Monitor KOZJ Signal
	<b>Amount:</b>	\$1,039.47
	<b>Component Description:</b>	Receive Equipment for Monitoring KOZJ Signal
	<b>Amount:</b>	\$202.00

Professional Services for  
Transmitter Building  
Improvements

**Component Description:** Professional  
Services for  
Transmitter  
Building  
Improvements  
**Amount:** \$6,460.00

**Component Description:** Professional  
Services for  
Transmitter  
Building  
Improvements  
**Amount:** \$3,840.00

**Component Description:** Professional  
Services for  
Transmitter  
Building  
Improvements  
**Amount:** \$1,410.00

**Component Description:** Professional  
Services for  
Transmitter  
Building  
Improvements  
**Amount:** \$290.00

<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>	\$2,288,047.98	\$1,210,361.81
			\$898,088.07

<b>Reimbursement Status</b>	<b>Question</b>	<b>Response</b>
	The facility has ceased operating on its pre-auction channel.	Yes
	Construction of final facilities or all necessary modifications are complete.	Yes
	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.

<p>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.</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>James Baker , Dr. .</b>  <i>Vice President, Missouri State University</i></p> <p>01/15/2020</p>



Certification	Section	Question	Response
	Submission of Final Allocation or Accounting Information 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 and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>2. 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>	

3. The above-named entity certifies that all costs identified as "actual costs" herein accurately represent the costs actually paid by the above-named entity, including any discounts, refunds, or rebates.
4. 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.
5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
6. 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.

**James  
Baker , Dr. .**  
*Vice  
President,  
Missouri  
State  
University*

01/15/2020

**Attachments**