



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **61026** | Service: **DCA** | Call **WJDE-LD** | Channel: **23 (UHF)** |
ID:
File **0000028038**
Number:
FRN: **0005869664** | Date **10/07**
Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|--|---|-------------------|----------------|----------------|
| WORD BROADCASTING NETWORK, INC. Doing Business As: WORD BROADCASTING NETWORK, INC. | Tom Fawbush 3701 FERN VALLEY ROAD LOUISVILLE, KY 40219 United States | +1 (502) 964-2121 | TOM@WBNA21.COM | Not-for-Profit |

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 |
|--|---------|-------|-------|
| The Preparer is same as the reimbursement contact. | | | |

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 | We are going to transition to our post auction assigned channel by moving our transmission facility to ASR # 1023532. We will then decommission our existing facility following testing and licensing at the new facility. |

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 | SCA132UB |
| | Year | 2008 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 2.0 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-4 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power capacity | 2.88 kW |
| | Justification for New Transmitter | We will need a new transmitter because we are moving to a new location and existing transmitter is on the roof of a high-rise building and moving it for testing is problematic. Transmitter is as close of a match to current as we could get from manufacture |

**Primary
Transmitter**

Other Transmitter Costs

| Section | Question | Response |
|--|---|-------------------|
| Electrical Service | Service Entrance (3 phases 800A 208V) | Yes |
| | 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? | Yes |
| | Type | Cooling Only |
| | Size | 10 tons |
| | Other Size | N/A |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leasehold improvement? | Yes |
| | Size | 100.0 square feet |
| 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

Add 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 this antenna currently shared with any other stations? | No |
| | Is this 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 | Class A |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Circular |
| | 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) | 5.3 kW |
| | | |

| | |
|--------------|------|
| Manufacturer | |
| Model | SL8 |
| Year | 2001 |

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? | No |
| New Antenna Manufacturer and Types | Class | Class A |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Elliptical |
| | Type | Slotted Coaxial |
| | Number of Stations Supported | N/A |
| | Number of Panels/Bays | N/A |
| | Lower Limit | N/A |
| | Upper Limit | N/A |
| | Design power capacity in use | N/A |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 15.0 kW |
| | Manufacturer | |
| | | |

| | |
|-------------------------------|---|
| Model | ATC-BCH38C43-V2-23 |
| Year | 2019 |
| Justification for New Antenna | We will need a new antenna tuned to the new channel position we have been assigned. |

Primary Antenna

Other Antenna Costs

| Section | Question | Response |
|------------------------------------|---|----------|
| Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | |
| | 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 |
| Elbow Complex | Do you require the separate purchase of the Elbow Complex? | No |
| | Broadband or Single Channel? | N/A |
| | Feed Line Size | N/A |
| Side Mount Brackets | Do you require the separate purchase of side mount brackets for a high power antenna? | No |
| Pattern Scatter Analysis | Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna? | No |

| | | |
|-------------------|--|----|
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | No |
|-------------------|--|----|

**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 | Flexible Air |
| | Diameter | 1 5/8 inches |
| | Other Diameter | N/A |
| | Segment Length | N/A |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 200 feet per run |

Primary **New Transmission Line**
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 Foam |
| | Diameter | 1 5/8 inches |
| | Other Diameter | N/A |
| | Segment Length | N/A |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 550 feet per run |
| | Justification for New Transmission Line | Moving to new location and will have a new cable run. |

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

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

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) | No |
| | Others Types of Users | Yes |
| | Is tower documented for structural analysis? | Unknown |
| | Is tower compliant with Rev G? | Unknown |
| Existing Tower Structure Registration | Do you have a tower registration number? | Yes |
| | ASR Number | 1023532 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 36° 14' 07.0" N- |
| | Longitude (NAD83) | 086° 45' 18.0" W- |
| | Overall Structure Height | 474.08 feet |
| | Support Structure Height | 474.08 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 574.14 feet |

| | | |
|--|------------------|--|
| | Structure Type | TOWER - Free Standing or Guyed Structure |
| | Tower Owner | 3201 Dickerson Properties LLC |
| | Date Constructed | 04/19/1996 |

Other Types of Users

Users

W286CY FX

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: | No 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 |
|----------------------------|---|
| Interim Dual Lease Expense | Lease on new tower location while building out facility prior to licensing. |

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 | Leased |
| | Is this tower consider Complex? | Located on Building |
| | Is this tower currently shared with any other stations? | Yes |
| | One or more FM, AM or TV radio broadcaster(s) | No |
| | Others Types of Users | Yes |
| | Is tower documented for structural analysis? | Unknown |
| | Is tower compliant with Rev G? | Unknown |
| Existing Tower Structure Registration | Do you have a tower registration number? | Yes |
| | ASR Number | 1044629 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 36° 09' 49.0" N- |
| | Longitude (NAD83) | 086° 46' 45.0" W- |
| | Overall Structure Height | 607.93 feet |
| | Support Structure Height | 607.93 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 489.17 feet |
| | Structure Type | B - Building |
| | Tower Owner | 401 CHURCH STREET LLC |

| | | |
|--|------------------|------------|
| | Date Constructed | 09/01/1983 |
|--|------------------|------------|

Other Types of Users

| |
|---------------|
| Users |
| Two way radio |

**Primary
Tower**

Tower Rigging Costs

| Section | Question | Response |
|------------------------------|-----------------------------------|---------------------|
| Tower Rigging Costs | Complex Tower | Located on Building |
| Helicopter Services Required | Are helicopter services required? | No |

**Primary
Tower**

Other Tower Expenses Not Listed

| Name | Description |
|---------------------------|------------------------------|
| Lease Termination Expense | Early lease termination fee. |

**Outside
Professional**

| Section | Question | Response |
|---|--|---|
| Services Costs Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 300 |
| | Explanation | Pattern analysis, transmitter spec, antenna spec, installation and supervision. |
| Outside RF consulting Engineering Services | Perform engineering study for new channel assignment and antenna development | Yes |
| | Prepare engineering section of Form FCC Construction Permit Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare engineering section of Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary Authority | No |
| | Quantity | N/A |
| | Do you have Distributed Transmission System engineering services? | N/A |
| | Critical Facility | N/A |
| | Terrain-Shielded Facility | N/A |
| Attorney and Other Outside Consulting Services | Prepare and file Form FCC Construction Permit Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |

| | | |
|--------------------------------------|--|-----|
| | Prepare and file Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary Authority | No |
| | Quantity | N/A |
| | NEPA Section 106 environmental review | No |
| | Environmental Assessment | No |
| | ASR Modification | No |
| | FAA Consultation (including preparation of FAA Form 7460) | No |
| | Negotiation of Lease and other Matter for Shared Locations | Yes |
| | Prepare or Review FCC Form 399 for Reimbursement | Yes |
| RF Field Engineering Services | Address transition timing and coordination issues w/ other stations and wireless providers | Yes |
| | Comprehensive coverage verification via field study | Yes |
| | 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**

Services not provided.

Other Expenses

| Section | Question | Response |
|-------------------------------------|--|----------|
| AM Pattern Disturbance | Is an Impact Study needed? | No |
| | Is Remediation needed? | No |
| Facility Expenses | Name | N/A |
| | Other Distributed Transmission System Expenses Not listed | N/A |
| | Name | N/A |
| | Is Notification of a Medical Facility required as a result of DTV broadcasting? | Yes |
| Permit and Filing Costs | Local Zoning | Yes |
| | Non-zoning permits | Yes |
| | BLM or NFS Coordination | No |
| | FCC Construction Permit Minor Change | No |
| | FCC License to Cover Application | No |
| | 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? | Yes |
| | 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

| Name | Description |
|----------------|--|
| In House Labor | 160 Hours of Labor by senior management at \$60 an hour. Total estimated cost of \$9600. |

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-4 | \$244,401.48 | \$234,801.48 | | \$118,467.64 | |
| 10 Ton system | \$38,900.00 | \$30,000.00 | N/A | \$0.00 | N/A |
| Service entrance 3 phase/800 amp/208 volt | \$14,400.00 | \$13,700.00 | N/A | \$0.00 | N/A |
| Other -- Building Addition Size: 100.0 | <i>\$8,000.00</i> | \$8,000.00 | N/A | \$0.00 | N/A |
| UHF - Liquid Cooled Solid State Transmitter 2.88 kW | <i>\$183,101.48</i> | \$183,101.48 | Please see GatesAir quote Q-80739 | \$118,467.64 | N/A |
| Sub-total | \$244,401.48 | \$234,801.48 | N/A | \$118,467.64 | N/A |
| Total for all systems | \$1,035,641.48 | \$823,693.43 | N/A | \$157,752.19 | N/A |

Components

| Actual Information | |
|--|---------------------------|
| Description | File Name |
| 10 Ton system | Information not provided. |
| Service entrance 3 phase /800 amp/208 volt | Information not provided. |
| Other -- Building Addition Size: 100.0 | Information not provided. |

| | | |
|--|-------------------------------|-------------|
| UHF - Liquid Cooled Solid State Transmitter 2.88 kW | | |
| | Component Description: | Transmitter |
| | Amount: | \$59,233.82 |
| | | |
| | Component Description: | Transmitter |
| | Amount: | \$59,233.82 |

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 ATC-BCH38C43-V2-23 | \$26,300.00 | \$10,000.00 | | \$5,000.00 | |
| UHF - Lower Power Side Mount, Class A One Station antenna -- basic | \$26,300.00 | \$10,000.00 | Please see Copy of (Alive Telecom Quote) SWBNA Scann19071216570 | \$5,000.00 | N/A |
| Sub-total | \$26,300.00 | \$10,000.00 | N/A | \$5,000.00 | N/A |
| Total for all systems | \$1,035,641.48 | \$823,693.43 | N/A | \$157,752.19 | N/A |

Components

| Actual Information | |
|--|--|
| Description | File Name |
| UHF - Lower Power Side Mount, Class A One Station antenna -- basic | <div>Component Description: ATC-BCH38C4S-V2-23</div> <div>Amount: \$5,000.00</div> |

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 | \$13,200.00 | \$12,650.00 | | \$0.00 | |
| Flexible Foam Transmission Line - dielectric, 1 5 /8" | \$13,200.00 | \$12,650.00 | N/A | \$0.00 | N/A |
| Sub-total | \$13,200.00 | \$12,650.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,035,641.48 | \$823,693.43 | N/A | \$157,752.19 | N/A |

Components

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 B | \$426,000.00 | \$305,000.00 | | \$0.00 | |
| Lease Termination Expense | <i>\$5,000.00</i> | \$5,000.00 | N/A | \$0.00 | N/A |
| Complex Tower (includes, for example, those with candelabras and/or stacked antennas) | \$421,000.00 | \$300,000.00 | N/A | \$0.00 | N/A |
| Primary Tower TOWER | \$122,500.00 | \$104,000.00 | | \$4,500.00 | |
| Short Tower (less than 500') | \$84,200.00 | \$72,000.00 | N/A | \$0.00 | N/A |
| Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study | \$26,300.00 | \$20,000.00 | N/A | \$0.00 | N/A |
| Interim Dual Lease Expense | <i>\$12,000.00</i> | \$12,000.00 | N/A | \$4,500.00 | N/A |
| Sub-total | \$548,500.00 | \$409,000.00 | N/A | \$4,500.00 | N/A |

| | | | | | |
|------------------------------|----------------|--------------|-----|--------------|-----|
| Total for all systems | \$1,035,641.48 | \$823,693.43 | N/A | \$157,752.19 | N/A |
|------------------------------|----------------|--------------|-----|--------------|-----|

Components

| Actual Information | | | | | | | | | | | | | |
|---|---|-------------------------------|--------------------|----------------|------------|-------------------------------|------------------|----------------|------------|-------------------------------|--------------------|----------------|------------|
| Description | File Name | | | | | | | | | | | | |
| Lease Termination Expense | Information not provided. | | | | | | | | | | | | |
| Complex Tower (includes, for example, those with candelabras and/or stacked antennas) | Information not provided. | | | | | | | | | | | | |
| Short Tower (less than 500') | Information not provided. | | | | | | | | | | | | |
| Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study | Information not provided. | | | | | | | | | | | | |
| Interim Dual Lease Expense | <table> <tr> <td>Component Description:</td><td>TN1008-T4 Oct Rent</td></tr> <tr> <td>Amount:</td><td>\$1,500.00</td></tr> <tr> <td>Component Description:</td><td>TN1008 July Rent</td></tr> <tr> <td>Amount:</td><td>\$1,500.00</td></tr> <tr> <td>Component Description:</td><td>TN1008-T4 Aug Rent</td></tr> <tr> <td>Amount:</td><td>\$1,500.00</td></tr> </table> | Component Description: | TN1008-T4 Oct Rent | Amount: | \$1,500.00 | Component Description: | TN1008 July Rent | Amount: | \$1,500.00 | Component Description: | TN1008-T4 Aug Rent | Amount: | \$1,500.00 |
| Component Description: | TN1008-T4 Oct Rent | | | | | | | | | | | | |
| Amount: | \$1,500.00 | | | | | | | | | | | | |
| Component Description: | TN1008 July Rent | | | | | | | | | | | | |
| Amount: | \$1,500.00 | | | | | | | | | | | | |
| Component Description: | TN1008-T4 Aug Rent | | | | | | | | | | | | |
| Amount: | \$1,500.00 | | | | | | | | | | | | |

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 | \$160,790.00 | \$117,341.95 | | \$29,784.55 | |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$1,945.00 | N/A |
| Comprehensive coverage verification via field study, if needed | \$84,200.00 | \$40,000.00 | N/A | \$0.00 | N/A |
| Attorney Fees - Negotiation of lease and other matters for shared locations | \$4,210.00 | \$8,591.95 | per Estimated Cost Justification WJDE-550-Attorney - Negotiate Lease and Other Matters v0 | \$8,591.95 | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application | \$2,365.00 | \$2,250.00 | N/A | \$0.00 | N/A |

| | | | | | |
|--|----------------|--------------|-----|--------------|--|
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$2,500.00 | N/A | \$0.00 | N/A |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | \$0.00 | N/A |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | N/A | \$0.00 | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$5,000.00 | N/A | \$0.00 | N/A |
| Project management of the transition | \$47,400.00 | \$45,000.00 | N/A | \$19,247.60 | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | \$0.00 | Staff request for change in category of reimbursement resulted in additional expense in this category. |
| Sub-total | \$160,790.00 | \$117,341.95 | N/A | \$29,784.55 | N/A |
| Total for all systems | \$1,035,641.48 | \$823,693.43 | N/A | \$157,752.19 | N/A |

Components

| Actual Information Description | File Name |
|--|--|
| Perform engineering study for new channel assignment and antenna development | Component Description: FCC Study Amount: \$1,045.00 |
| | Component Description: Study Amount: \$900.00 |
| | Component Description: CTI December 2017 Invoice Amount: \$185.00 |
| | Component Description: CTI July 2017 Invoice Amount: \$950.00 |
| | Component Description: First consultation and study for the WJDE repack Amount: \$1,045.00 |
| | Component Description: Hours dedicated to the repack process by WJDE General Manager from Jan - Nov 2017 Amount: \$3,600.00 |
| | Component Description: Second of several studies for the WJDE repack move Amount: \$900.00 |
| Comprehensive coverage verification via field study, if needed | Information not provided. |

| | |
|---|--|
| Attorney Fees - Negotiation of lease and other matters for shared locations | <p>Component Description:</p> <p>"Review and analysis of multiple FCC releases on Incentive Auctions, multiple teleconfs Tom, Pastor Bob, etc."</p> <p>Amount:</p> <p>\$8,591.95</p> |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Address transition timing and coordination issues w/ other stations and wireless | Information not provided. |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | <p>Component Description:</p> <p>Prepare Engineering Section Form 2100</p> <p>Amount:</p> <p>\$765.00</p> |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | <p>Component Description:</p> <p>Preparation for and completion of CP Application</p> <p>Amount:</p> <p>\$4,500.00</p> |

| | | |
|--|-------------------------------|---|
| Project management of the transition | Component Description: | Project Management |
| | Amount: | \$1,547.60 |
| | Component Description: | Project Management Hours for Tom Fawbush, GM of WJDE. |
| | Amount: | \$17,700.00 |
| | Component Description: | Coordination of transition project |
| | Amount: | \$1,591.95 |
| Prepare and or review reimbursement form | Component Description: | Review and preparation of reimbursement process |
| | Amount: | \$2,500.00 |
| | Component Description: | Prepare or review Reimbursement Form |
| | Amount: | \$185.00 |

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 | \$42,450.00 | \$39,900.00 | | \$0.00 | |
| In House Labor | <i>\$9,600.00</i> | \$9,600.00 | N/A | N/A | N/A |
| MVPD Notification of Channel Change | <i>\$5,000.00</i> | \$5,000.00 | N/A | N/A | N/A |
| Develop and air announcement of upcoming channel change | <i>\$4,500.00</i> | \$4,500.00 | N/A | N/A | N/A |
| Equipment Storage | <i>\$5,000.00</i> | \$5,000.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | <i>\$1,800.00</i> | \$1,800.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$1,000.00</i> | \$1,000.00 | N/A | N/A | N/A |
| Non-zoning permits | <i>\$2,000.00</i> | \$2,000.00 | N/A | N/A | N/A |
| Local Zoning | <i>\$2,000.00</i> | \$2,000.00 | N/A | N/A | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$9,000.00 | N/A | N/A | N/A |
| Sub-total | \$42,450.00 | \$39,900.00 | N/A | \$0.00 | N/A |

| | | | | | |
|------------------------------|----------------|--------------|-----|--------------|-----|
| Total for all systems | \$1,035,641.48 | \$823,693.43 | N/A | \$157,752.19 | N/A |
|------------------------------|----------------|--------------|-----|--------------|-----|

Components

Information not provided.

| Cost Information | Grand Total | | | |
|------------------|-----------------------|-----------------------------|----------------|--------------|
| | | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
| | Total for all systems | \$1,035,641.48 | \$823,693.43 | \$157,752.19 |

| 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.

| | |
|---|---|
| <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>Tom Fawbush <i>General Manager</i></p> <p>10/07/2019</p> |

| Certification | Section | Question | Response |
|---------------|--|--|----------|
| | Submission of Actual Cost Documentation Statements | WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR 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). | |
| | | <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.

| | |
|--|---|
| <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>Tom Fawbush <i>General Manager</i></p> <p>10/07/2019</p> |

Attachments