



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **34171** | Service: **DTV** | Call **WKAS** | Channel: **36 (UHF)** |
ID:
File **0000026895**
Number:
FRN: **0001790583** | Date **09/17**
Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
KENTUCKY AUTHORITY FOR EDUCATIONAL TV	Shae Hopkins 600	+1 (859)	SHOPKINS@KET. ORG	Government Entity
Doing Business As: KENTUCKY AUTHORITY FOR EDUCATIONAL TV	COOPER DR LEXINGTON, KY 40502 United States	258- 7000		

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
Greg Best , Best . <i>Greg Best Consulting, Inc.</i>	Greg Best 16100 Outlook Avenue Stilwell, KS 66085 United States	+1 (816) 792- 2913	gbconsulting54@gmail. com

**Broadcaster
Information
and
Transition
Plan**

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	No
Briefly describe transition plan	Please see attached repack plan exhibit.

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	DHD20P1
	Year	2001
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	5 kW

**Primary
Transmitter**

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	Maxiva UAXTE-8
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	5 kW
	Justification for New Transmitter	Pre-auction transmitter no longer supported by supplier; not re-tunable.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	Yes
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	3 inches
	Length	50.0 feet
	Other Electrical Service	No

	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

**Primary
Transmitter**

Other Transmitter Cost Not Listed

Information not provided.

Antennas

Section	Question	Response
Antenna Related Expenses	Do you have antenna related expenses?	Yes

Primary Antenna

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	61.3 kW

Manufacturer	
Model	TLP-16B (26)
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?	Yes
	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	Top 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)	63.2 kW
	Manufacturer	

Model	ATW29H2-ETO-36H
Year	2019
Justification for New Antenna	Primary antenna is not broadband or able to be tuned to a new channel. New top mount reduces overall repack cost. Please see Repack Plan Exhibit for details.

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	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
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel

	Feed Line Size	3 1/8 inches inches
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?	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?	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	3 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	370 feet per run

**Primary
Transmission Line**

New Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Type	Rigid
	Diameter	3 1/8 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	425 feet per run
	Justification for New Transmission Line	Installation of new line makes possible the operation of the current facility while the tower is rigged and the construction of the new facility is underway. Rigid 3" t- line is upgrade from 3" flex.

Primary Transmission Line	Other Transmission Line Expenses Not Listed
Information not provided.	

Tower Equipment And Rigging Costs

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

Primary Tower

Existing Tower

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	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?	No
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1044042
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	38° 27' 44.0" N-
	Longitude (NAD83)	082° 37' 12.0" W-
	Overall Structure Height	390.09 feet
	Support Structure Height	371.71 feet
	Ground Elevation Above Mean Sea Level (AMSL)	806.75 feet
	Structure Type	TOWER - Free Standing or Guyed Structure

	Tower Owner	KENTUCKY AUTHORITY FOR EDUCATIONAL TELEVISION DBA = WKAS
	Date Constructed	01/01/1968

Other Types of Users

Users

FACID 81527 FM

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:	Minor Reinforcements needed

Primary Tower

Tower Rigging Costs

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

Primary Tower

Other Tower Expenses Not Listed

Name	Description
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Load Study

Structural engineering tower load study is required to design tower reinforcements and rigging.

**Outside
Professional**

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	80
	Explanation	KET Staff require outside services to manage the upgrades.
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	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	No
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Progress and Transition Reports	Engineering consultant costs not otherwise listed

Other Expenses

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Facility Expenses	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
Permit and Filing Costs	Local Zoning	No
	Non-zoning permits	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	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?	No
	Does this relocation require Equipment Storage?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

**Other
Expenses**

Other Expenses Not Listed

Name	Description
Internal Labor	FCC Reimbursement Clerk hired for repack reimbursement ONLY

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 Maxiva UAXTE-8	\$291,700.00	\$277,450.00		\$128,066.13	
3" Rigid Conduit and Wiring (Cost per foot)	\$2,600.00	\$2,450.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$13,700.00	N/A	\$550.00	N/A
UHF - Air Cooled Solid State Transmitter 4 - 6 kW	\$236,500.00	\$225,000.00	N/A	\$127,516.13	N/A
Sub-total	\$291,700.00	\$277,450.00	N/A	\$128,066.13	N/A
Total for all systems	\$989,280.00	\$1,194,128.60	N/A	\$672,963.52	N/A

Components

Actual Information Description	File Name
3" Rigid Conduit and Wiring (Cost per foot)	Information not provided.

Switchgear - industrial 800 amp	Information not provided.	
Service entrance 3 phase /800 amp/208 volt	Component Description: Amount:	KET Transmitter building electrical upgrade \$550.00
UHF - Air Cooled Solid State Transmitter 4 - 6 kW	Component Description: Amount: Component Description: Amount:	eComm admin and support, distribution services at time of bidding -- GatesAir RFP-48-19 \$362.88 transmitter, rf system, electrical system, installation & proof, freight \$127,153.25

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 ATW29H2-ETO-36H	\$303,830.00	\$254,900.00		\$118,417.75	
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	\$7,600.00	\$7,400.00	N/A	N/A	N/A
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$235,000.00	Cost estimate adjusted for reimbursement of horizontal-polarized antenna like the pre-repack primary antenna.	\$107,792.75	N/A

Sweep test of existing antenna	\$6,730.00	\$12,500.00	the third sweep was to confirm the performance of the existing transmission line, before it was disconnected from the current DTV antenna. This was included at every site where the existing DTV transmission line was reused to feed the new main antenna	\$10,625.00	the third sweep was to confirm the performance of the existing transmission line, before it was disconnected from the current DTV antenna. This was included at every site where the existing DTV transmission line was reused to feed the new main antenna
Sub-total	\$303,830.00	\$254,900.00	N/A	\$118,417.75	N/A
Total for all systems	\$989,280.00	\$1,194,128.60	N/A	\$672,963.52	N/A

Components

Actual Information	
Description	File Name
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	Information not provided.

UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	<div> Component Description: antenna (less vpol) and replacement lighting (35%) </div> <div> Amount: \$44,079.00 </div>
	<div> Component Description: Antenna gain and TPO evaluation and revision of specifications </div> <div> Amount: \$306.25 </div>
	<div> Component Description: Antenna and Line Spec </div> <div> Amount: \$437.50 </div>
	<div> Component Description: antenna (less vpol) and replacement lighting (50%) </div> <div> Amount: \$62,970.00 </div>
Sweep test of existing antenna	<div> Component Description: system sweep (35%) </div> <div> Amount: \$4,375.00 </div>
	<div> Component Description: system sweep (50%) </div> <div> Amount: \$6,250.00 </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	\$51,000.00	\$75,966.10		\$40,510.64	
Rigid Transmission Line - copper, 3 1 /8" broadband	\$51,000.00	\$75,966.10	Licensee upgraded to 3" rigid line. See transition plan and cover letter regarding reimbursement of transmission line.	\$40,510.64	N/A
Sub-total	\$51,000.00	\$75,966.10	N/A	\$40,510.64	N/A
Total for all systems	\$989,280.00	\$1,194,128.60	N/A	\$672,963.52	N/A

Components

Actual Information Description	File Name
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Rigid Transmission Line - copper, 3 1/8" broadband		
	Component Description:	transmission line (less additional cost for rigid line upgrade) 50%
	Amount:	\$23,829.79
	Component Description:	transmission line system (less additional cost of rigid line upgrade)
	Amount:	35% \$16,680.85

Cost Information

Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower TOWER	\$280,500.00	\$532,000.00		\$373,905.62	
Short Tower (less than 500')	\$84,200.00	\$345,000.00	KET obtained quotation of realistic scope of tower rigging work from reputable supplier. Please see attached Tower Work exhibit.	\$201,017.23	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$25,000.00	N/A	\$19,036.04	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	\$143,859.35	N/A
Load Study	<i>\$12,000.00</i>	\$12,000.00	Structural engineering tower load study is required to design tower reinforcements and rigging.	\$9,993.00	N/A

Sub-total	\$280,500.00	\$532,000.00	N/A	\$373,905.62	N/A
Total for all systems	\$989,280.00	\$1,194,128.60	N/A	\$672,963.52	N/A

Components

Actual Information	
Description	File Name
Short Tower (less than 500')	Component Description:
	installation services (50%)
	Amount:
	\$117,339.45
	Component Description:
	installation services (35%)
	Amount:
	\$82,137.61
	Component Description:
	eComm admnistration and support, and distribution services at the time of bidding- Electronics Research Inc
	Amount:
	\$1,540.17

Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study		
	Component Description:	Second Installment
	Amount:	Tower Inspections \$3,064.00
	Component Description:	First Installment
	Amount:	Foundation Mapping \$4,000.00
	Component Description:	Third Installment
	Amount:	Tower Mapping \$1,414.00
	Component Description:	mapping complete
	Amount:	\$7,500.00
	Component Description:	Second Installment
	Amount:	Tower Mapping \$1,373.00
	Component Description:	First Installment
	Amount:	Tower Mapping \$1,373.00
	Component Description:	First Installment
	Amount:	Tower Inspections \$1,726.04

Minor tower reinforcement /modifications		
	Component Description:	tower mod
	Amount:	\$142,500.00
	Component Description:	Second Installment Tower Modification Design
	Amount:	\$674.97
	Component Description:	eComm administration and support, distribution services at the time of bidding -- Allstate Tower contract
	Amount:	\$637.50
	Component Description:	First Installment Tower Modification Design
	Amount:	\$4,500.00
	Component Description:	rebid billed for distribution services only -- Allstate Tower, RFB-198-18
	Amount:	\$46.88

Load Study

Component Description: Second Installment
Geotechnical
Studies
Amount: \$4,690.00

Component Description: First Installment
Geotechnical
Studies
Amount: \$2,310.00

Component Description: First Installment
Tower Structural
Analysis
Amount: \$2,993.00

Component Description: Second Installment
Tower Structural
Analysis
Amount: \$507.00

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	\$43,200.00	\$41,312.50		\$10,041.85	
Progress and Transition Reports	<i>\$4,000.00</i>	\$4,000.00	Engineering consultant costs not otherwise listed	\$1,225.00	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	\$656.25	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$1,123.00	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
Project management of the transition	\$12,640.00	\$12,000.00	KET Staff require outside services to manage the upgrades.	\$404.53	N/A

Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$1,487.50	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	\$622.00	N/A
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$2,000.00	N/A	\$739.20	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$721.87	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,062.50	N/A	\$3,062.50	N/A
Sub-total	\$43,200.00	\$41,312.50	N/A	\$10,041.85	N/A
Total for all systems	\$989,280.00	\$1,194,128.60	N/A	\$672,963.52	N/A

Components

Actual Information
Description

File Name

Progress and Transition Reports	Component Description: quarterly report Amount: \$787.50
	Component Description: quarterly report Amount: \$437.50
ASR modification (prepare FCC Form 854)	Component Description: FCC ASR Issue resolution Amount: \$525.00
	Component Description: FCC ASR application followup and management Amount: \$131.25
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description: Second Installment Attorney Fees CP Amount: \$925.00
	Component Description: First Installment Attorney Fees CP Amount: \$49.50
	Component Description: Third Installment Attorney Fees CP Amount: \$148.50
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.

Project management of the transition	<table> <tr> <td data-bbox="711 165 1015 210">Component Description:</td><td data-bbox="1150 165 1374 255">project management tasks</td></tr> <tr> <td data-bbox="711 255 820 300">Amount:</td><td data-bbox="1150 255 1230 300">\$87.50</td></tr> <tr> <td data-bbox="711 389 1015 434">Component Description:</td><td data-bbox="1150 389 1307 479">project management</td></tr> <tr> <td data-bbox="711 479 820 524">Amount:</td><td data-bbox="1150 479 1246 524">\$175.00</td></tr> <tr> <td data-bbox="711 613 1015 658">Component Description:</td><td data-bbox="1150 613 1307 703">project management</td></tr> <tr> <td data-bbox="711 703 820 748">Amount:</td><td data-bbox="1150 703 1230 748">\$87.50</td></tr> <tr> <td data-bbox="711 837 1015 882">Component Description:</td><td data-bbox="1150 837 1334 882">travel expenses</td></tr> <tr> <td data-bbox="711 882 820 927">Amount:</td><td data-bbox="1150 882 1230 927">\$10.78</td></tr> <tr> <td data-bbox="711 1016 1015 1061">Component Description:</td><td data-bbox="1150 1016 1307 1106">project management</td></tr> <tr> <td data-bbox="711 1106 820 1151">Amount:</td><td data-bbox="1150 1106 1230 1151">\$43.75</td></tr> </table>	Component Description:	project management tasks	Amount:	\$87.50	Component Description:	project management	Amount:	\$175.00	Component Description:	project management	Amount:	\$87.50	Component Description:	travel expenses	Amount:	\$10.78	Component Description:	project management	Amount:	\$43.75
Component Description:	project management tasks																				
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Prepare and or review reimbursement form	<table> <tr> <td data-bbox="711 1263 1015 1308">Component Description:</td><td data-bbox="1150 1263 1374 1341">Second Installment 399</td></tr> <tr> <td data-bbox="711 1341 820 1386">Amount:</td><td data-bbox="1150 1341 1230 1386">\$87.50</td></tr> <tr> <td data-bbox="711 1476 1015 1520">Component Description:</td><td data-bbox="1150 1476 1334 1554">First Installment 399</td></tr> <tr> <td data-bbox="711 1554 820 1599">Amount:</td><td data-bbox="1150 1554 1270 1599">\$1,400.00</td></tr> </table>	Component Description:	Second Installment 399	Amount:	\$87.50	Component Description:	First Installment 399	Amount:	\$1,400.00												
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Component Description:	First Installment 399																				
Amount:	\$1,400.00																				

<p>Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application</p>	<table> <tr> <td data-bbox="710 168 1013 212">Component Description:</td><td data-bbox="1149 168 1412 604">public notice; research and analysis re: repack phase assignment and plans; coordination of linked station for testing and sequence of transitioning stations</td></tr> <tr> <td data-bbox="710 616 821 660">Amount:</td><td data-bbox="1149 616 1252 660">\$204.00</td></tr> <tr> <td data-bbox="710 750 1013 795">Component Description:</td><td data-bbox="1149 750 1316 828">environmental review</td></tr> <tr> <td data-bbox="710 840 821 884">Amount:</td><td data-bbox="1149 840 1236 884">\$49.50</td></tr> <tr> <td data-bbox="710 974 1013 1019">Component Description:</td><td data-bbox="1149 974 1364 1086">email re: repack quarterly report, research re: same</td></tr> <tr> <td data-bbox="710 1097 821 1142">Amount:</td><td data-bbox="1149 1097 1236 1142">\$35.00</td></tr> <tr> <td data-bbox="710 1232 1013 1276">Component Description:</td><td data-bbox="1149 1232 1380 1310">Second Installment Attorney Fees</td></tr> <tr> <td data-bbox="710 1321 821 1366">Amount:</td><td data-bbox="1149 1321 1252 1366">\$234.50</td></tr> <tr> <td data-bbox="710 1456 1013 1500">Component Description:</td><td data-bbox="1149 1456 1340 1534">First Installment Attorney Fees</td></tr> <tr> <td data-bbox="710 1545 821 1590">Amount:</td><td data-bbox="1149 1545 1236 1590">\$99.00</td></tr> </table>	Component Description:	public notice; research and analysis re: repack phase assignment and plans; coordination of linked station for testing and sequence of transitioning stations	Amount:	\$204.00	Component Description:	environmental review	Amount:	\$49.50	Component Description:	email re: repack quarterly report, research re: same	Amount:	\$35.00	Component Description:	Second Installment Attorney Fees	Amount:	\$234.50	Component Description:	First Installment Attorney Fees	Amount:	\$99.00
Component Description:	public notice; research and analysis re: repack phase assignment and plans; coordination of linked station for testing and sequence of transitioning stations																				
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Component Description:	Second Installment Attorney Fees																				
Amount:	\$234.50																				
Component Description:	First Installment Attorney Fees																				
Amount:	\$99.00																				
<p>FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase</p>	<table> <tr> <td data-bbox="710 1702 1013 1747">Component Description:</td><td data-bbox="1149 1702 1364 1814">notice of proposed height increase in newspaper</td></tr> <tr> <td data-bbox="710 1825 821 1870">Amount:</td><td data-bbox="1149 1825 1252 1870">\$214.20</td></tr> <tr> <td data-bbox="710 1960 1013 2004">Component Description:</td><td data-bbox="1149 1960 1292 2004">FAA Inquiry</td></tr> <tr> <td data-bbox="710 2016 821 2060">Amount:</td><td data-bbox="1149 2016 1252 2060">\$525.00</td></tr> </table>	Component Description:	notice of proposed height increase in newspaper	Amount:	\$214.20	Component Description:	FAA Inquiry	Amount:	\$525.00												
Component Description:	notice of proposed height increase in newspaper																				
Amount:	\$214.20																				
Component Description:	FAA Inquiry																				
Amount:	\$525.00																				

Perform engineering study for new channel assignment and antenna development		
	Component Description:	Second Installment Engineering Analysis
	Amount:	\$1,225.00
	Component Description:	Review of site documentation and antennas, facility planning
	Amount:	\$459.37
	Component Description:	First Installment Project Startup
	Amount:	\$459.37
	Component Description:	Linked station neighbor analysis
	Amount:	\$262.50

Prepare engineering
section of FCC Form 2100
(main), Construction Permit
Application

Component Description:

Antenna and
transmission line
bid spec review
and bid response
review

Amount:

\$700.00

Component Description:

First Installment
TC Study Analysis
CP

Amount:

\$1,400.00

Component Description:

FCC ASR mod app
upload and CP
Mod upload, New
antenna and line
specs

Amount:

\$437.50

Component Description:

Hitachi and
GatesAir response
review, new
antenna and line
specs

Amount:

\$525.00

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	\$19,050.00	\$12,500.00		\$2,021.53	
Internal Labor	<i>\$2,000.00</i>	\$2,000.00	N/A	\$434.03	N/A
MVPD Notification of Channel Change	<i>\$1,500.00</i>	\$1,500.00	KET estimate to search for and notify all cable companies.	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$1,500.00</i>	\$1,500.00	KET estimate for developing and airing announcement.	N/A	N/A
Equipment Storage	<i>\$500.00</i>	\$500.00	GBC estimate	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$2,000.00</i>	\$2,000.00	KET estimate based on known costs.	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$5,000.00	GBC estimate based on known quotations	\$1,587.50	N/A
Sub-total	\$19,050.00	\$12,500.00	N/A	\$2,021.53	N/A
Total for all systems	\$989,280.00	\$1,194,128.60	N/A	\$672,963.52	N/A

Components

Actual Information	File Name	
Description		
Internal Labor	Component Description:	payroll expenses for internal labor
	Amount:	\$71.75
	Component Description:	payroll expenses for internal labor
	Amount:	\$37.85
	Component Description:	payroll expenses for internal labor
	Amount:	\$37.55
	Component Description:	payroll expenses for internal labor
	Amount:	\$66.91
Internal Labor	Component Description:	payroll expenses for internal labor
	Amount:	\$57.54
	Component Description:	payroll expenses for internal labor
	Amount:	\$69.49
	Component Description:	payroll expenses for internal labor
	Amount:	\$34.51
	Component Description:	payroll expenses for internal labor
	Amount:	\$58.43
MVPD Notification of Channel Change	Information not provided.	

Develop and air announcement of upcoming channel change	Information not provided.
Equipment Storage	Information not provided.
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.
DTV Medical Facility Notification	<div> <div>Component Description:</div> <div>medical notification</div> </div> <div> <div>Amount:</div> <div>\$1,587.50</div> </div>

**Cost
Information**

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$989,280.00	\$1,194,128.60	\$672,963.52

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>Shae Hopkins <i>Executive Director</i></p> <p>09/17/2019</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>Shae Hopkins <i>Executive Director</i></p> <p>09/17/2019</p>

Attachments