



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **10535** | Service: **DCA** | Call **KPSP-CD** | Channel: **18 (UHF)**
ID: | Sign:
File **0000026847**
Number:
FRN: **0001590330** | Date **10/08**
Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|--|--|----------|----------------------|----------------|
| GULF-CALIFORNIA BROADCAST COMPANY | TIM HANNAN | +1 (816) | TIM.HANNAN@NPGCO.COM | Corporation |
| Doing Business As: GULF-CALIFORNIA BROADCAST COMPANY | PO Box 64501 ST. JOSEPH, MO 64501 United States | 271-8405 | | |

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. | Yes |
| Briefly describe transition plan | The plan is for KPSP-CD is to replace the existing channel 38 system with a new channel 18 transmitter. They will move their tower location to share a broadcast antenna, combiner, transmission line, and tower with KESQ-TV, KDFX-CD, and KCWQ-LD. |

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 | DT834A |
| | Year | 2001 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 1 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 | UAXTE-4R37 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power capacity | 2.4 kW |
| | Justification for New Transmitter | SEE ATTACHED "RALEIGH-#349249-v1-KPSP-CD_Form_399_New_Transmitter_Justificati.pdf |

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 | Yes |
| | Size | 2 inches |
| | Length | 30.0 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 | Lease New |
| | Antenna Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is the existing antenna shared with another station or stations? | No |
| | Is the existing antenna directional? | Yes |
| | Is antenna in operating condition? | Yes |
| | Is antenna located on or in close proximity to an antenna farm? | Yes |
| Existing Antenna Manufacturer and Type | Class | Class A |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | Type | Other |
| | 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 | PARPANEL |
| | ERP: (Effective Radiated Power) | 9.0 kW |
| Manufacturer | | |

| | |
|-------|--------|
| Model | 4DR-8S |
| Year | 1998 |

**Primary
Antenna**

New Antenna Costs

| Section | Question | Response |
|---|--|-----------------|
| New Antenna Description | Use | Primary (Main) |
| | Description of Use | N/A |
| | Change Type | Lease New |
| | Is this a request for upgraded equipment? | Yes |
| | Ownership | Leased |
| | Owner | KESQ-TV |
| | Is antenna shared? | Yes |
| | Is antenna directional? | Yes |
| | Will antenna be located on or in close proximity to an antenna farm? | Yes |
| New Antenna Manufacturer and Types | Class | Full Power |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Elliptical |
| | Type | Broadband Panel |
| | Number of Stations Supported | 4 |
| | Number of Panels/Bays | 8 |
| | Lower Limit | 470.00 MHz |
| | Upper Limit | 700.00 MHz |
| | Design power capacity in use | 5.5 % |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 15.0 kW |
| | Manufacturer | |
| Model | SBB-E-8C170 | |

| | |
|-------------------------------|---|
| Year | 2018 |
| Justification for New Antenna | Existing antenna will cannot be re-tuned to the transition frequency. |

Primary Antenna

Other Antenna Costs

| Section | Question | Response |
|------------------------------------|---|------------|
| Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | Yes |
| | Type | New |
| | Number of channels supported | 4 |
| | Frequencies of channels supported | RF channel |
| | Frequency | N/A |
| | Do you need a combiner output splitter /switcher for dual feed lines? | No |
| Elbow Complex | Do you require the separate purchase of the Elbow Complex? | No |
| | Broadband or Single Channel? | N/A |
| | Feed Line Size | N/A |
| Side Mount Brackets | Do you require the separate purchase of side mount brackets for a high power antenna? | 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 |

Enter a list of RF channel numbers.

| RF Channel Number |
|--------------------------|
| 33 |
| 18 |
| 20 |
| 28 |

**Primary
Antenna**

Other Antenna Cost Not Listed

Information not provided.

**Interim
Antenna**

New Antenna Costs

| Section | Question | Response |
|--|--|-----------------|
| New Antenna Description | Use | Interim |
| | Description of Use | N/A |
| | Change Type | Lease New |
| | 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 Type | Class | Class A |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | Type | Broadband Panel |
| | Number of Stations Supported | 1 |
| | Number of Panels/Bays | 1 |
| | Lower Limit | 0.001 MHz |
| | Upper Limit | 0.001 MHz |
| | Design power capacity in use | 0.0 % |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 0.001 kW |
| | Manufacturer | |
| | Model | N/A |
| | Year | 2018 |

Justification for New Antenna

INTERIM
ANTENNA
NOT
NEEDED.

**Interim
Antenna**

Other Antenna Costs

| Section | Question | Response |
|---------------------------------|---|----------|
| 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 an 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 |

**Interim
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? | No | |
| | One or more FM, AM or TV radio broadcaster(s) | N/A | |
| | Others Types of Users | N/A | |
| | Is tower documented for structural analysis? | Unknown | |
| | Is tower compliant with Rev G? | No | |
| Existing Tower Structure Registration | Do you have a tower registration number? | Yes | |
| | ASR Number | 1220472 | |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 33° 51' 58.1" N- | |
| | Longitude (NAD83) | 116° 26' 05.0" W- | |

| | |
|--|--|
| Overall Structure Height | 88.91 feet |
| Support Structure Height | 60.04 feet |
| Ground Elevation Above Mean Sea Level (AMSL) | 1555.10 feet |
| Structure Type | TOWER - Free Standing or Guyed Structure |
| Tower Owner | Gulf-California Broadcast Co |
| Date Constructed | 09/23/1968 |

Primary Tower

Tower Modification Costs

| Section | Question | Response |
|----------------------|--|--------------------------|
| Engineering Study | Please what type of engineering study is required, if any: | No study needed |
| 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

Information not provided.

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? | No |
| | Is this tower currently shared with any other stations? | No |
| | One or more FM, AM or TV radio broadcaster(s) | N/A |
| | Others Types of Users | N/A |
| | Is tower documented for structural analysis? | Yes |
| | Is tower compliant with Rev G? | No |
| Existing Tower Structure Registration | Do you have a tower registration number? | No |
| | ASR Number | |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 33° 51' 01.0" N- |
| | Longitude (NAD83) | 116° 26' 01.0" W- |
| | Overall Structure Height | 117.90 feet |
| | Support Structure Height | 117.90 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 1536.00 feet |
| | Structure Type | LTOWER - Lattice Tower |
| | Tower Owner | Inside Tower |
| | Date Constructed | 11/01/1979 |

**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

Information not provided.

Outside Professional Services Costs

| Section | Question | Response |
|--|--|---|
| Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 595 |
| | Explanation | Please see the attached quote from Widelity |
| 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 |
| 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 | No |
| | Prepare or Review FCC Form 399 for Reimbursement | Yes |
| | Address transition timing and coordination issues w/ other stations and wireless providers | Yes |
| RF Field Engineering Services | Comprehensive coverage verification via field study | No |
| | RF exposure measurements | Yes |
| | Additional Field Engineering Service | No |
| | Number of Days | N/A |
| | Justification | N/A |

Other Professional Services Expenses Not Listed

Outside Professional Services Costs

| Name | Description |
|---|--|
| Additional Repack Legal Services Not Otherwise Specified in Form 399 | NON-CATALOG LEGAL SERVICES SUCH AS REVIEW OF QUARTERLY TRANSITION STATUS REPORTS AND OTHER MISCELLANEOUS NON-CATALOG LEGAL FEES. |

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 | Yes |
| | FCC Special Temporary Authority Application | No |
| Other Miscellaneous Expenses | Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)? | Yes |
| | Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs? | 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? | No |

**Other
Expenses**

Other Expenses Not Listed

Information not provided.

Cost Information

Transmitters

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|---|-----------------------------|---------------------|------------------------------|---------------------|---------------------------|
| Primary Transmitter UAXTE-4R37 | \$141,180.00 | \$93,007.80 | | \$28,463.28 | |
| UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW | \$126,000.00 | \$82,457.80 | N/A | \$28,463.28 | N/A |
| Service entrance 3 phase/800 amp/208 volt | \$14,400.00 | \$9,800.00 | N/A | N/A | N/A |
| 2" Rigid Conduit and Wiring (Cost per foot) | \$780.00 | \$750.00 | N/A | N/A | N/A |
| Sub-total | \$141,180.00 | \$93,007.80 | N/A | \$28,463.28 | N/A |
| Total for all systems | \$590,726.90 | \$325,516.27 | N/A | \$105,649.39 | N/A |

Components

| Actual Information | |
|---|---|
| Description | File Name |
| UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW | Component Description: UAXTE-4 Transmitter |
| | Amount: \$14,231.64 |
| | Component Description: UAXTE-4 Transmitter |
| | Amount: \$14,231.64 |

| | |
|--|---------------------------|
| Service entrance 3 phase /800 amp/208 volt | Information not provided. |
| 2" Rigid Conduit and Wiring (Cost per foot) | Information not provided. |

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 |
|--|-----------------------------|--------------------|--|--------------------|---------------------------|
| Interim Antenna N/A | \$27,560.00 | \$0.00 | | \$0.00 | |
| UHF â€“ Broadband Panel, Side Mount Auxiliary /Interim, 0 horizontally polarized | <i>\$0.00</i> | \$0.00 | PHANTOM ANTENNA | N/A | N/A |
| UHF - Lower Power Side Mount, Class A broadband panel (cost per panel) | \$1,260.00 | \$0.00 | INTERIM ANTENNA NO LONGER NEEDED | N/A | N/A |
| UHF - Lower Power Side Mount, Class A One Station antenna -- basic | \$26,300.00 | \$0.00 | INTERIM ANTENNA NO LONGER NEEDED | N/A | N/A |
| Primary Antenna SBB-E-8C170 | \$84,200.00 | \$14,396.57 | | \$13,739.00 | |
| New combiner, cost per channel (without antenna) | \$84,200.00 | \$14,396.57 | 22.5% of the combiner cost. Please see attached narrative for details. | \$13,739.00 | N/A |

| | | | | | |
|--|--------------|--------------|--|--------------|-----|
| UHF - High Power, Side Mount, broadband panel, 8 bay,, 15 kW input, directional,, elliptically or circularly polarized | \$0.00 | \$0.00 | Associated cost recorded under KESQ-TV - KPSP-CD will use this antenna, owned by KESQ-TV, at a cost of \$0. Please see attached narrative for details. | N/A | N/A |
| Sub-total | \$111,760.00 | \$14,396.57 | N/A | \$13,739.00 | N/A |
| Total for all systems | \$590,726.90 | \$325,516.27 | N/A | \$105,649.39 | N/A |

Components

| Actual Information | |
|--|--|
| Description | File Name |
| UHF " Broadband Panel, Side Mount Auxiliary /Interim, 0 horizontally polarized | Information not provided. |
| UHF - Lower Power Side Mount, Class A broadband panel (cost per panel) | Information not provided. |
| UHF - Lower Power Side Mount, Class A One Station antenna -- basic | Information not provided. |
| New combiner, cost per channel (without antenna) | <p>Component Description: 24.31075.110 CA8PPXX200E /CS8PPXX160E</p> <p>Amount: \$13,739.00</p> |

UHF - High Power, Side
Mount, broadband panel, 8
bay,, 15 kW input,
directional,, elliptically or
circularly polarized

Information not provided.

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 LTOWER | \$84,200.00 | \$81,900.00 | | \$0.00 | |
| Short Tower (less than 500') | \$84,200.00 | \$81,900.00 | N/A | N/A | N/A |
| Primary Tower TOWER | \$84,200.00 | \$0.00 | | \$0.00 | |
| Short Tower (less than 500') | \$84,200.00 | \$0.00 | Cost to be paid by KESQ-TV. Please see attached narrative for details. | N/A | N/A |
| Sub-total | \$168,400.00 | \$81,900.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$590,726.90 | \$325,516.27 | N/A | \$105,649.39 | N/A |

Components

Information not provided.

Cost Information

Outside Professional Services

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|-----------------------------|---------------------|--|--------------------|---------------------------|
| Outside Professional Services | \$150,251.90 | \$126,636.90 | | \$63,447.11 | |
| RF Exposure Measurements | \$21,050.00 | \$0.00 | All RF Exposure Measurement costs will be apportioned to sister station KESQ-TV. KPSP-CD will not seek reimbursement for these costs. Please see attached cover letter | N/A | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$5,000.00 | N/A | \$4,728.66 | N/A |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | \$375.00 | N/A |

| | | | | | |
|--|---------------------------|-------------|---|-------------|-----|
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$1,000.00 | N/A | \$1,000.00 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$2,000.00 | N/A | \$937.50 | N/A |
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$2,500.00 | N/A | N/A | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | \$2,432.60 | N/A |
| Project management of the transition | \$94,010.00 | \$99,675.00 | Please see the attached quote from Widelity. | \$43,267.65 | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application | \$2,365.00 | \$2,250.00 | N/A | \$493.80 | N/A |
| Additional Repack Legal Services Not Otherwise Specified in Form 399 | <i>\$10,211.90</i> | \$10,211.90 | see Estimated Cost Justification KPSP-CD-550-Attorney - Additional Repack Legal Services v0 | \$10,211.90 | N/A |

| | | | | | |
|------------------------------|--------------|--------------|-----|--------------|-----|
| Sub-total | \$150,251.90 | \$126,636.90 | N/A | \$63,447.11 | N/A |
| Total for all systems | \$590,726.90 | \$325,516.27 | N/A | \$105,649.39 | N/A |

Components

| Actual Information | |
|--|--|
| Description | File Name |
| RF Exposure Measurements | Information not provided. |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | <p>Component Description: General Filing and associated costs 2017 see "Repack Invoice Memo"</p> <p>Amount: \$2,291.36</p> <p>Component Description: KPSP Charges related to CP.</p> <p>Amount: \$2,386.30</p> <p>Component Description: Description: KPSP-CD-550-Attorney - Construction Permit Application (Main)</p> <p>Amount: \$51.00</p> |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | <p>Component Description: KPSP-CD-Eng.</p> <p>Amount: \$375.00</p> |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | <p>Component Description: Engineering study work for new channel assignment and antenna development.</p> <p>Amount: \$1,000.00</p> |

| | |
|---|--|
| <p>Perform engineering study for new channel assignment and antenna development</p> | <p>Component Description: Engineering study work for new channel assignment and antenna development.</p> <p>Amount: \$375.00</p> |
| | <p>Component Description: "Calculation of replication transmitter power output requirement based on FCC issued replication facility effective radiated power."</p> <p>Amount: \$250.00</p> |
| | <p>Component Description: Engineering study work for new channel assignment and antenna development.</p> <p>Amount: \$62.50</p> |
| | <p>Component Description: Professional Services</p> <p>Amount: \$250.00</p> |
| <p>Address transition timing and coordination issues w/ other stations and wireless</p> | <p>Information not provided.</p> |
| <p>Prepare and or review reimbursement form</p> | <p>Component Description: KPSP-CD-590-Prepare and/or Review Reimbursement Form</p> <p>Amount: \$119.40</p> |

Component Description: KPSP-CD-590-
Prepare and/or
Review
Reimbursement
Form
Amount: \$204.00

Component Description: KPSP-CD-590-
Prepare and/or
Review
Reimbursement
Form-
Amount: \$595.80

Component Description: KPSP-CD-590-
Prepare and/or
Review
Reimbursement
Form
Amount: \$170.40

Component Description: KPSP-CD-590-
Prepare and/or
Review
Reimbursement
Form
Amount: \$788.80

Component Description: Repack Legal
Services for KPSP-
CD
Amount: \$264.40

Component Description: KPSP-CD-590-
Prepare and/or
Review
Reimbursement
Form
Amount: \$289.80

transition

| | |
|-------------------------------|----------------------------|
| Component Description: | Outside Project Management |
| Amount: | \$4,500.00 |
| Component Description: | Project Management |
| Amount: | \$2,744.85 |
| Component Description: | Project Management |
| Amount: | \$1,037.80 |
| Component Description: | Project Management |
| Amount: | \$2,562.55 |
| Component Description: | Project Management |
| Amount: | \$3,286.80 |
| Component Description: | Project Management |
| Amount: | \$2,603.00 |
| Component Description: | Project Management |
| Amount: | \$1,579.80 |
| Component Description: | Project Management |
| Amount: | \$3,800.30 |
| Component Description: | Project Management |
| Amount: | \$2,677.25 |

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|--|--|
| | <p>Component Description: Project Management</p> <p>Amount: \$3,628.40</p> |
| | <p>Component Description: Project Management</p> <p>Amount: \$2,173.15</p> |
| | <p>Component Description: Project Management</p> <p>Amount: \$1,250.80</p> |
| | <p>Component Description: Cost Reconciliation</p> <p>Amount: \$5,356.20</p> |
| | <p>Component Description: Project Management</p> <p>Amount: \$3,275.40</p> |
| | <p>Component Description: Project Management</p> <p>Amount: \$2,791.35</p> |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | <p>Component Description: KPSP-CD-550-Attorney - License to Cover Application (Main)</p> <p>Amount: \$391.80</p> |
| | <p>Component Description: Legal Services</p> <p>Amount: \$102.00</p> |
| Additional Repack Legal Services Not Otherwise Specified in Form 399 | <p>Component Description: Legal Services</p> <p>Amount: \$3,684.30</p> |

Component Description: legal services
Amount: \$442.80

Component Description: Legal Services
Amount: \$306.00

Component Description: Legal Services
Amount: \$848.40

Component Description: KPSP-CD-550-
Attorney -
Additional Repack
Legal Services
Amount: \$185.60

Component Description: Repack Legal
Services
Amount: \$151.90

Component Description: Repack Legal
Services
Amount: \$27.84

Component Description: Non-Catalog Legal
Services such as
review of quarterly
transition status
reports and other
miscellaneous non-
catalog legal fees.
Amount: \$37.12

Component Description: Repack Legal
Services
Amount: \$27.84

Component Description: Repack Legal Services
Amount: \$706.10

Component Description: Telephone Conference with Jim DeChant
Amount: \$46.40

Component Description: Repack Legal Services for KPSP-CD
Amount: \$754.20

Component Description: Non-Catalog Legal Services such as review of quarterly transition status reports and other miscellaneous non-catalog legal fees.
Amount: \$649.60

Component Description: Repack Legal Services for KPSP-CD
Amount: \$1,053.20

Component Description: legal services
Amount: \$272.40

Component Description: Repack Legal Services
Amount: \$324.80

| | |
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| Component Description: | Repack Legal Services for KPSP- CD |
| Amount: | \$535.80 |

| | |
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| Component Description: | Repack Legal Services |
| Amount: | \$157.60 |

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 | \$19,135.00 | \$9,575.00 | | \$0.00 | |
| Develop and air announcement of upcoming channel change | <i>\$750.00</i> | \$750.00 | PRODUCTION COSTS NECESSARY ADVERTISING ANNOUNCEMENTS | N/A | N/A |
| Equipment Storage | <i>\$2,500.00</i> | \$2,500.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | <i>\$1,500.00</i> | \$1,500.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$2,500.00</i> | \$2,500.00 | N/A | N/A | N/A |
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$325.00 | N/A | N/A | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$2,000.00 | N/A | N/A | N/A |
| Sub-total | \$19,135.00 | \$9,575.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$590,726.90 | \$325,516.27 | N/A | \$105,649.39 | N/A |

Components

Information not provided.

Cost Information **Grand Total**

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|------------------------------|------------------------------------|-----------------------|--------------------|
| Total for all systems | \$590,726.90 | \$325,516.27 | \$105,649.39 |

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 |
|---------------|---|---|----------|
| | <p>Submission of Estimated Expenses Statements</p> | <p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p> | |
| | | <ol style="list-style-type: none"> 1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. | |

4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

James W. DeChant
VP of Technology

10/08/2019

| Certification | Section | Question | Response |
|---------------|--|--|----------|
| | <p>Submission of Actual Cost Documentation Statements</p> | <p>WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).</p> | |
| | | <ol style="list-style-type: none"> 1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct. 3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. | |

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

| | |
|--|--|
| <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>James W. DeChant <i>VP of Technology</i></p> <p>10/08/2019</p> |

Attachments