

(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility 10202 Service: DTV Call KSCE Channel: 21 (UHF)

Sign:

ID:

File **0000027688** 

Number:

FRN: **0008529935** Date **12/16** 

Submitted: /2019

# Applicant Information

#### **Applicant Name, Type, and Contact Information**

Applicant	Address	Phone	Email	Applicant Type
CHANNEL 38 CHRISTIAN TELEVISION Doing Business As: CHANNEL 38 CHRISTIAN TELEVISION	GRACE G. RENDALL 2201 EAST WYOMING AVENUE EL PASO, TX 79903 United States	+1 (915) 532- 8588	GRACER143@AOL. COM	Not-for- Profit

# Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

#### Preparer Contact Information

#### **Preparer Contact Name and Information**

Applicant	Address	Phone	Email
Joseph C. Chautin III Attorney Hardy, Carey, Chautin & Balkin, LLP	1080 West Causeway Approach Mandeville, LA 70471 United States	+1 (985) 629-0777	jchautin@hardycarey. 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	Replace existing Ch38/39 antenna with a wideband antenna. Replace transmission line, with 4" Heliax. This keeps the center of radiation and location on tower the same, allowing either channel to be able to operate. Replace the transmitter.

# **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	
Manufacturer and Type	Model	NV7340V
	Year	2016
	Туре	Solid State
	Solid State Cooling	Liquid 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	TMU9-5
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	3.0 kW
	Justification for New Transmitter	Existing Main transmitter is no longer supported by manufacturer. AXCERA Innovator HX original transmitter replaced with current R&S NV7340 in December, 2016, due to severe system failure. See Narrative.

# Primary Transmitter

# **Other Transmitter Costs**

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No

	Power	N/A
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Туре	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 leashold 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 Unformation not provided.

**Other Transmitter Cost Not Listed** 

#### **Antennas**

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

# Primary Antenna

# **Existing Antenna Information**

Section	Question	Response
Existing Antenna	Type of change	Purchase New
Description	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	Class	Full Power
Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	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)	150.0 kW
	Manufacturer	
		'

Model	PSIUSMD24AP- 38/39
Year	2006

# 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?	Yes
New Antenna	Class	Full Power
Manufacturer and Types	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Broadband Slot
	Number of Stations Supported	2
	Number of Panels/Bays	24
	Lower Limit	500.00 MHz
	Upper Limit	626.00 MHz
	Design power capacity in use	19.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	75.0 kW
	Manufacturer	
	Model	RD-24C170- 500626-SL

Year	2017
Justification for New Antenna	Broadband antenna to replace existing Ch 39 antenna to accommodate both existing Ch 39 and repack Ch 21. No tower modifications required. Heliax 4" line to replace existing 6-1 /8" rigid coax.

# Primary Antenna

#### **Other Antenna Costs**

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	Yes
	Туре	New
	Number of channels supported	2
	Frequencies of channels supported	RF channel
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	No
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?	Yes

Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	Yes
Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes

# Enter a list of RF channel numbers.

RF Channel Number	
39	
21	

## Primary Antenna

## **Other Antenna Cost Not Listed**

Information not provided.

Transmission <sup>Seffien</sup>	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

# Primary Transmission Se

# **Existing Transmission Line**

on 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	
	Туре	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	362 feet per run

# Primary

## **New Transmission Line**

Transmission	n seinen	Question	Response
	New Transmission Line	Use	Primary (Main)
	Costs	Description of Use	N/A
		Change Type	Purchase New
		Is this a request for upgraded equipment?	No
		Туре	Flexible Air
		Diameter	4 inches
		Other Diameter	N/A
		Segment Length	N/A
		Other Segment Length	N/A
		Number of parallel runs	1
		Length	362 feet per
		Justification for New Transmission Line	Existing line is 20 ft. and will not accommodate Ch 21 repack assignment. The 4" Heliax will accommodate both Ch 39 and Ch 21. See Narrative

Primary

Other Transmission Line Expenses Not Listed

Transmission loinetion 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	Leased
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	No
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1202400
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	31° 48' 18.9" N-
	Longitude (NAD83)	106° 29' 00.7" W-
	Overall Structure Height	388.12 feet
	Support Structure Height	340.88 feet
	Ground Elevation Above Mean Sea Level (AMSL)	5604.92 fee

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Pinnacle Towers LLC
Date Constructed	01/05/2000

FM, AM or TV radio broadcasters. Facility ID's, Call Signs and Services of other broadcast stations with whom the tower is shared

Facility ID	Call Sign	Service
67760	KTSM-TV	DTV
68753	KTFN	DTV
49832	KVIA-TV	DTV

#### Primary Tower

#### **Tower Modification Costs**

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for 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
Tower Rigging	Tower rigging required to exchange antennas, install new 4" Heliax and remove existing 6-1/8" rigid coax

# Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	695
	Explanation	Interface with landlord, reimbursement filing, expense tracking, progress reporting, budget creation, coordinate tower crew, manufacturers and other contractors, deliveries, installation and other work on site by the construction deadline for phase 8.
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	Prepare and file Form FCC Construction Permit Application	Yes
Services	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	Yes
	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	No
	Additional Field Engineering Service	No
	Number of Days	N/A

Justification	N/A

## Outside Professional

# Other Professional Services Expenses Not Listed

Şervices Costs	Description
Other Attorney Fees	Attorney Fees and Other Matters outside of Construction Permit Application and Licence to Cover

# 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	Yes
	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?	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 Not Listed

**Expenses** 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 Primary Transmitter TMU9-5	Predetermined Cost Estimate \$300,635.00	Estimated Cost \$195,000.00	Estimated Cost Justification	Actual Cost \$161,383.00	Actual Cost Justification
UHF - Air Cooled Solid State Transmitter 2.501 - 3.999 kW	\$155,600.00	\$49,965.00	N/A	\$16,348.00	N/A
UHF - Air Cooled Solid State Transmitter 3.0 kW	\$145,035.00	\$145,035.00	***System Notice: Estimate adjusted and locked because line has been superseded.  ***	\$145,035.00	N/A
Sub-total	\$300,635.00	\$195,000.00	N/A	\$161,383.00	N/A
Total for all systems	\$1,195,128.00	\$859,909.00	N/A	\$712,264.39	N/A

# Components

Actual Information Description	File Name	
UHF - Air Cooled Solid State Transmitter 2.501 - 3.999 kW	Component Description:	LU220 dual rack- mounted encoder video transmit
	Amount:	\$16,348.00

UHF - Air Cooled Solid State Transmitter 3.0 kW

Component Description: R&S TMU9-5

transmitter w /installation and

parts

**Amount:** \$14,503.50

Component Description: R&S TMU9-5

transmitter w /installation and

parts

**Amount:** \$58,014.00

Component Description: Primary

Transmitter

**Amount:** \$72,517.50

# **Cost Information**

#### **Antennas**

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

Description Primary Antenna RD- 24C170- 500626-SL	Predetermined Cost Estimate \$161,955.00	Estimated Cost \$87,374.00	Estimated Cost Justification	Actual Cost \$86,887.80	Actual Cost Justification
UHF - High Power, Side Mount, basic slot antenna, 24 bay,, 75 kW input, directional,, horizontally polarized	\$42,615.00	\$42,615.00	Side mount antenna includes shipping.	\$42,128.80	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	Sweep test of new line and antenna with report.	\$6,400.00	N/A
New combiner, cost per channel (without antenna)	\$84,200.00	\$18,370.00	2 channel 3.5 kW combiner with shipping	\$18,370.00	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$14,989.00	Per Marsand, Inc. Invoice 7011	\$14,989.00	N/A

Pattern	\$5,260.00	\$5,000.00	Study	\$5,000.00	N/A
scatter			required to		
analysis for			determine		
side mount			best		
high/med			distance		
power			from tower		
antennas (if			to be able		
not included			to make		
in antenna			proper		
base cost)			brackets.		
Sub-total	\$161,955.00	\$87,374.00	N/A	\$86,887.80	N/A
Total for all systems	\$1,195,128.00	\$859,909.00	N/A	\$712,264.39	N/A

# Components

Actual Information Description	File Name	
UHF - High Power, Side Mount, basic slot antenna, 24 bay,, 75 kW input, directional,, horizontally polarized	Component Description: Amount:	Primary Antenna \$4,212.88
	Component Description: Amount:	Primary Antenna \$21,064.40
	Component Description: Amount:	Primary Antenna \$16,851.52

Sweep test of existing antenna		
	Component Description:	Primary Antenna -
		Sweep Test
	Amount:	\$640.00
	Component Description:	Primary Antenna -
		Sweep Test
	Amount:	\$2,560.00
	Component Description:	Primary Antenna -
		Sweep Test
	Amount:	\$3,200.00
New combiner, cost per		
channel (without antenna)	Component Description:	Primary Antenna -
		Combiner System
	Amount:	\$1,837.00
	Component Description:	Primary Antenna -
		Combiner System
	Amount:	\$9,185.00
	Component Description:	Primary Antenna
	Component Description:	Primary Antenna Combiner System

Side mount brackets for high power antennas (if not Primary Antenna -**Component Description:** included in antenna base Side Mount cost) **Brackets** \$1,000.00 Amount: **Component Description:** Additional work on tower for antenna mounting brackets modifications Amount: \$4,989.00 **Component Description:** Primary Antenna -Side Mount Brackets for Antenna Amount: \$5,000.00 **Component Description:** Primary Antenna -Side Mount **Brackets** Amount: \$4,000.00

Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)

Component Description: Primary Antenna -

Pattern Scatter

Analysis

**Amount:** \$500.00

Component Description: Primary Antenna -

Pattern Scatter

Analysis \$2,500.00

**Amount**: \$2,500.00

Component Description: Primary Antenna

Pattern Scatter

Analysis

**Amount:** \$2,000.00

# **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	\$26,788.00	\$22,000.00		\$17,544.11	
Flexible Air Transmission Line - dielectric, 4"	\$26,788.00	\$22,000.00	Transmission line, mounting hardware and shipping	\$17,544.11	N/A
Sub-total	\$26,788.00	\$22,000.00	N/A	\$17,544.11	N/A
Total for all systems	\$1,195,128.00	\$859,909.00	N/A	\$712,264.39	N/A

## Components

Actual Information Description	File Name	
Flexible Air Transmission Line - dielectric, 4"	Component Description: Amount:	Primary Transmission Line \$1,754.41
	Component Description: Amount:	Primary Transmission Line \$7,017.64
	Component Description:  Amount:	Primary Transmission Line \$8,772.06

# **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	\$516,640.00	\$339,340.00		\$339,340.00	
Tower Rigging	\$261,840.00	\$261,840.00	Please see uploaded cancellation and new Marsand quote 1802. Includes installation of 4" Heliax and wideband antenna and removal of 6-1/8" rigid coax and Ch 39 antenna.	\$261,840.00	N/A
Structural engineering tower load study for well documented tower	\$12,600.00	\$7,500.00	N/A	\$7,500.00	N/A
Short Tower (less than 500')	\$84,200.00	\$20,000.00	Crown Castle Lessor costs	\$20,000.00	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$50,000.00	N/A	\$50,000.00	N/A
Sub-total	\$516,640.00	\$339,340.00	N/A	\$339,340.00	N/A

Total for all	\$1,195,128.00	\$859,909.00	N/A	\$712,264.39	N/A
systems					

# Components

Actual Information Description	File Name	
Tower Rigging		
	Component Description:	Existing Primary Tower - Tower Rigging/Crew
	Amount:	\$52,368.00
	Component Description:	Existing Primary Tower - Tower
	Amount:	Rigging/Crew \$190,672.00
	Component Description:	Existing Tower - Tower Rigging /Crew
	Amount:	\$18,800.00

Structural engineering tower load study for well documented tower	Component Description:	Existing Primary Tower - Structural Engineering Load
	Amount:	Study \$750.00
	Component Description:	Existing Primary Tower - Structural Engineering Load
	Amount:	Study \$3,000.00
	Component Description:	Existing Tower - Structural Load
	Amount:	Study \$3,750.00
Short Tower (less than 500')		
	Component Description:	Existing Tower - Short Tower, Tower Equipment
	Amount:	and Rigging Cost \$20,000.00

Minor tower reinforcement
/modifications

**Component Description:** Existing Primary

Tower - Minor

Tower

Reinforcement

/Modification

**Amount:** \$5,000.00

**Component Description:** Existing Primary

Tower - Minor

Tower

Reinforcement /Modification

**Amount:** \$20,000.00

Component Description: Existing Tower -

Minor Tower
Reinforcement
/Modification

**Amount:** \$25,000.00

# **Cost Information**

## **Outside Professional Services**

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

			Estimated		
Description	Predetermined Cost Estimate	Estimated Cost	Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$150,310.00	\$179,995.00		\$83,287.28	
Other Attorney Fees	\$5,000.00	\$5,000.00	N/A	\$2,431.00	N/A
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	\$10,520.00	\$5,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	\$156.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$1,796.00	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	\$1,500.00	N/A

Sub-total  Total for all	\$150,310.00 \$1,195,128.00	\$179,995.00 \$859,909.00	N/A N/A	\$83,287.28 \$712,264.39	N/A N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$7,000.00	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	\$2,500.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$3,570.00	Quote 1802	\$3,256.00	N/A
Project management of the transition	\$109,810.00	\$144,675.00	See Narrative and Widelity quote. Prolonged management due to late phase, coordination and planning at congested site.	\$61,648.28	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$3,000.00	N/A

Actual Information		
Description	File Name	
Other Attorney Fees		
	Component Description:	Review email from Mark Bishop re KSCE Crown Castle lease
	Amount:	\$234.00
	Component Description:	Load and partially complete 3Q 2018 transition progress report
	Amount:	\$156.00
	Component Description:	Coordinate with engineer on completion of 2019
		1Q and construction complete transition
	Amount:	progress reports. \$572.00
	Component Description:	KSCE-590-Attorney Fees - Other Matters
	Amount:	\$182.00
	Component Description:	Legal services
	Amount:	\$1,053.00
	Component Description: Amount:	Legal services \$156.00
	Component Description:	Attorney Fees - Other Matters
	Amount:	\$78.00

Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Component Description: Amount:	Portion of Invoice attributable to Form 2100 Atty Fees \$1,718.00
	Component Description:  Amount:	Load and complete initial drafts of KSCE license to cover application \$156.00
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description:	Review FCC Incentive Auction
	Amount:	Closing Notice, Review channel reassignment notice; Load and prepare initial draft for Form 2100. \$1,796.00
Prepare engineering section of FCC Form 2100		
(main), License to Cover Application	Component Description:	RF Engineer - Prepare Engineering Section License to Cover Application
	Amount:	\$1,500.00

Prepare engineering section of FCC Form 2100 **Component Description:** RF Engineer -(main), Construction Prepare Permit Application Engineering Section of Construction Permit Application \$3,000.00 Amount: Project management of the transition **Component Description:** Project Management \$1,672.65 Amount: **Component Description:** Project Management Amount: \$1,851.35 **Component Description:** Project Management Amount: \$2,251.65 **Component Description:** Project Management Amount: \$4,726.55 **Component Description:** Project Management

\$332.50

**Amount:** \$332.50

**Component Description:** Project

Management

**Amount:** \$2,093.60

**Component Description:** Project

Management

**Amount:** \$2,277.50

Component Description: Project

Management

**Amount:** \$231.25

**Component Description:** Project

Management

**Amount:** \$2,370.60

Component Description: Project

management

**Amount:** \$29,100.00

**Component Description:** Project

Management

**Amount:** \$2,798.00

Component Description: Project

Management

**Amount:** \$2,221.30

Component Description: Final Review and

File of Form 387

**Amount:** \$78.00

**Component Description:** Project

Management

**Amount:** \$4,047.50

Component Description: Project

Management

**Amount:** \$526.25

Component Description: Project

management

**Amount:** \$5,069.58

Prepare and or review reimbursement form

Component Description: KSCE-590-Prepare

and Review Reimbursement

Form

**Amount:** \$104.00

Component Description: Review

Reimbursement

Form

**Amount:** \$2,500.00

Component Description: Portion of Invoice

attributable to initial submission of Form

399

**Amount:** \$496.00

Component Description: Review, certify and

file Form 399 for

KSCE

**Amount:** \$78.00

Component Description: Prepare and

Review

Reimbursement

Form

**Amount:** \$418.00

Component Description: Review Form 399

filing

**Amount:** \$156.00

Address transition timing and coordination issues w/ **Component Description: Transition Timing** other stations and wireless and Coordination \$250.00 Amount: **Component Description: Transition Timing** and Coordination \$1,250.00 Amount: **Component Description: Transition Timing** and Coordination Amount: \$1,000.00 Perform engineering study for new channel **Component Description:** RF Engineer assignment and antenna **Engineering Study** development for New Channel Assignment \$7,000.00 Amount:

## **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	\$38,800.00	\$36,200.00		\$23,822.20	
Develop and air announcement of upcoming channel change	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$10,000.00	\$10,000.00	N/A	\$10,000.00	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$9,000.00	N/A	\$3,017.20	N/A
MVPD Notification of Channel Change	\$5,805.00	\$5,805.00	Marsand, Inc. Quote #1802 and Invoice #6983	\$5,805.00	N/A
Equipment Storage	\$5,000.00	\$5,000.00	N/A	\$5,000.00	N/A

Sub-total	\$38,800.00	\$36,200.00	N/A	\$23,822.20	N/A
Total for all systems	\$1,195,128.00	\$859,909.00	N/A	\$712,264.39	N/A

### Components

Actual Information Description	File Name	
Develop and air announcement of upcoming channel change	Information not provided.	
Disposal Costs (for equipment and other waste, net of any salvage value)	Component Description: Amount:	Disposal Cost \$10,000.00
FCC Filing Fees - Form 2100 license to cover application	Information not provided.	
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.	
DTV Medical Facility Notification	Component Description:	DTV notification service, notification of medical facilities
	Amount:	\$2,887.20
	Component Description:	DTV Medical Notifications
	Amount:	\$130.00
MVPD Notification of Channel Change	Component Description: Amount:	MVPD Notification \$5,000.00
	Component Description: Amount:	MVPD Notification \$805.00

Equipment Storage		
	Component Description:	Equipment
		Storage Cost
	Amount:	\$5,000.00

## Cost Information

### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,195,128.00	\$859,909.00	\$712,264.39

Reimbursem	envestiarus	Response
	The facility has ceased operating on its pre- auction channel.	Yes
	Construction of final facilities or all necessary modifications are complete.	Yes
	All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator.	No

Section Question Response

## Submission of Estimated Expenses Statements

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.

- 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 abovenamed applicant for the Authorization(s) specified above.

# Grace Rendall VicePresident & General Manager

12/16/2019

Section Question Response

## Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (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).

- 1. The Authorized
  Person signing
  below certifies and
  represents that he
  /she is authorized to
  submit this TV
  Broadcaster
  Relocation Fund
  Reimbursement
  Form on behalf of
  the above-named
  entity.
- The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.
- 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.

- 8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 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.

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

# Grace Rendall VicePresident & General Manager

12/16/2019

Section Question Response

#### Submission of Final Allocation or Accounting Information Statements

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.

- 1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. The abovenamed entity acknowledges that all certifications and attached documentation are considered material representations.
- 2. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.

- 3. The above-named entity certifies that all costs identified as "actual costs" herein accurately represent the costs actually paid by the above-named entity, including any discounts, refunds, or rebates.
- 4. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 6. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the abovenamed applicant for the Authorization(s) specified above. Grace
Rendall
VicePresident &
General
Manager

12/16/2019

### **Attachments**