

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility 62207 Service: DTV Call WIYC Channel: 19 (UHF)

Sign:

File **0000068174**

Number:

ID:

FRN: **0031406812** Date **01/20**

Submitted: /2020

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
WOODS COMMUNICATIONS CORPORATION Doing Business As: WCOV	Paul McTear 1 WCOV Avenue Montgomery, AL 36111 United States	+1 (334) 323-5591	paul@wcov. com	Corporation

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
Michael Carroll Chief Engineer Woods Communications	Michael Carroll One WCOV Ave Montgomery, AL 36111 United States	+1 (334) 288- 7024	mikec@wcov. 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	WIYC Ch.48, Troy, AL has been reassigned to Ch19. The Ch 19 operation will employ a new antenna to be side-mounted to the existing WIYC tower in lieu of the existing Ch. 48 antenna. No change in the antenna location will take place.

Transmitters

rs	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	InnovatorHX HU500AD
	Year	2011
	Туре	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	2 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?	Yes
	Manufacturer	
	Model	UAXTE- 12R44
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	7.2 kW
	Justification for New Transmitter	New transmitter is required as old transmitter will not work on new channel.

Primary Transmitter

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	Yes
	Power	300 kVA
	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	50.0 feet

	Other Electrical Service	Yes
	Description	Fitzpatrick, Alabama station electrical work per Frazier and Gardner Electric Co.
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

Other Transmitter Cost Not Listed

Transmitter Information not provided.

Antennas

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

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	Тор
	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)	50.0 kW

Manufacturer	
Model	DIE,TLP- 24C
Year	2011

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?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna	Class	Full Power
Manufacturer and Types	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Туре	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)	185.0 kW
	Manufacturer	

Model	ANT TLP- 24C
Year	2019
Justification for New Antenna	Existing antenna can not be retuned.

Other Antenna Costs

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

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	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna	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/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)	27.6 kW
	Manufacturer	
	Model	ANT TLP- 24B
	Year	2018

Justification for New Antenna	Required
	as the main
	antenna
	and line are
	replaced.

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 ^{Seffien}	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

Primary Transmission Line

Existing Transmission Line

n 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	Manufacturer	
Line Manufacturer and Type	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	1200 feet per run

Primary Transmi

New Transmission Line

sion Line Settion		Question	Response
New Transmiss Costs	sion Line	Use	Primary (Main)
		Description of Use	N/A
		Change Type	Purchase New
		Is this a request for upgraded equipment?	No
		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	1200 feet per run
		Justification for New Transmission Line	Old line will not work with new frequency.

Primary Other Transmission Line Expenses Not Listed

Transmission loine tion not provided.

Interim

New Transmission Line

ansmissio	n Line Section	Question	Response
	New Transmission Line	Use	Interim
	Costs	Description of Use	N/A
	Change Type	Purchase New	
		Туре	Flexible Air
		Diameter	3 inches
		Segment Length	N/A
		Other Segment Length	
		Number of parallel runs	1
		Length	700 feet per run
		Justification for New Transmission Line	used for interim system during Full power build out.

Interim Other Transmission Line Expenses Not Listed

Transmission loine tion 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?	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	Do you have a tower registration number?	Yes
Registration	ASR Number	1210049
Coordinates (NAD83 (North American Datum of	Latitude (NAD83)	32° 03' 36.5" N-
1983))	Longitude (NAD83)	085° 57' 01.8" W-
	Overall Structure Height	999.99 fee
	Support Structure Height	999.99 fee
	Ground Elevation Above Mean Sea Level (AMSL)	567.91 fee

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	WIYC, Inc.
Date Constructed	10/11/2000

Primary Tower

Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for undocumented /poorly documented tower
Tower Reinforcements	Please select whether tower reinforcements are needed:	Serious Reinforcements needed

Primary Tower

Tower Rigging Costs

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

Primary Tower

Other Tower Expenses Not Listed

Name	Description	
Structural Analysis	Structural Analysis for Tower	
Tower Modification Design	Tower modification Design	
Tower Geotech Report	Geo Report for Tower	

Tower Mapping-TIA	Tower Mapping and TIA Inspection for Tower.
Tower Modifications	Modification to tower to be in compliance with Rev G

Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	595
	Explanation	WIYC requires the aid of outside project management services in order to fulfill the requirements of the repack. WIYC does not have sufficient resource capacity and expertise in house to handle all of the repack related expenses.
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	Yes

	Quantity	1
	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	Yes
	Quantity	1
	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	No
	Address transition timing and coordination issues w/ other stations and wireless providers	No
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	No
	Additional Field Engineering Service	No

Number of Days	N/A
Justification	N/A

Outside
Professional Services Expenses Not Listed
Professional Services ©pstsided.

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)?	No
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

Other Expenses 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 UAXTE- 12R44	Predetermined Cost Estimate \$320,371.08	Estimated Cost \$319,421.08	Estimated Cost Justification	Actual Cost \$261,495.87	Actual Cost Justification
Other Electrical Service: Fitzpatrick, Alabama station electrical work per Frazier and Gardner Electric Co.	\$8,252.00	\$8,252.00	per WIYC Frazier and Gardner Electric Co.	\$3,623.00	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$1,300.00	\$1,300.00	N/A	\$0.00	N/A
Transformer 3 phase /480v - 300 KVA	\$36,800.00	\$35,850.00	N/A	\$0.00	N/A
UHF - Air Cooled Solid State Transmitter 7.2 kW	\$274,019.08	\$274,019.08	see Estimated Cost Justification WIYC-110- 1st Primary Transmitter - UHF Air- Cooled Solid State, 1-2.5 kW v0	\$257,872.87	N/A
Sub-total	\$320,371.08	\$319,421.08	N/A	\$261,495.87	N/A

Total for all	\$4,343,681.08	\$2,977,622.22	N/A	\$1,845,308.34	N/A
systems					

Components

Actual Information Description	File Name	
Other Electrical Service: Fitzpatrick, Alabama station electrical work per Frazier and Gardner Electric Co.	Component Description: Amount:	Electrical work request \$3,623.00
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Transformer 3 phase/480v - 300 KVA	Information not provided.	
UHF - Air Cooled Solid State Transmitter 7.2 kW	Component Description: Amount:	A: Transmitter \$125,288.04
	Component Description: Amount:	Transmitter \$132,584.83

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 Cos
Interim Antenna ANT TLP- 24B	\$31,000.00	\$31,000.00		\$0.00	
UHF - High Power, Side Mount, basic slot antenna, 28 kW input, directional,, horizontally polarized	\$31,000.00	\$31,000.00	N/A	\$0.00	N/A
Primary Antenna ANT TLP- 24C	\$138,240.00	\$59,096.14		\$48,443.52	
UHF - Lower Power Side Mount, One Station antenna . medium power (50- 200 kW), elliptically or circularly polarized	\$103,100.00	\$34,503.74	DTVPros Quote JEHQ1464- 01, line items 1 & 4. Note, this amount does not include any freight nor taxes.	\$31,053.36	N/A
Sweep test of existing antenna	\$6,730.00	\$6,550.00	N/A	\$5,760.00	N/A

Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,120.00	N/A	\$0.00	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$12,922.40	DTVPros Quote JEHQ1464- 01	\$11,630.16	N/A
Sub-total	\$169,240.00	\$90,096.14	N/A	\$48,443.52	N/A
Total for all systems	\$4,343,681.08	\$2,977,622.22	N/A	\$1,845,308.34	N/A

Components

Actual Information Description	File Name
UHF - High Power, Side Mount, basic slot antenna, 28 kW input, directional,, horizontally polarized	Information not provided.

UHF - Lower Power Side Mount, One Station antenna		LIIJE 1 0W
. medium power (50-200	Component Description:	UHF - LOW POWER SIDE
kW), elliptically or circularly		MOUNT
polarized	Amount:	\$15,526.68
	Component Description:	UHF - LOW
		POWER SIDE
	A	MOUNT
	Amount:	\$15,526.68
Sweep test of existing		
antenna	Component Description:	WIYC-210-
		Primary Antenna
		- Sweep Test
	Amount:	\$2,880.00
	Common and Docarintians	WIVC 240
	Component Description:	WIYC-210- Primary Antenna
		- Sweep Test
	Amount:	\$2,880.00
Pattern scatter analysis for	Information not provided.	
side mount high/med power antennas (if not included in antenna base cost)	miormation not provided.	
Side mount brackets for high		
power antennas (if not	Component Description:	WIYC-210-
included in antenna base		Primary Antenna
cost)		- Side Mount
		Brackets
	Amount:	\$5,815.08
	Component Descriptions	WIVO 240
	Component Description:	WIYC-210- Primary Antenna
		- Side Mount
		Brackets

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
Interim Transmission Line	\$41,300.00	\$54,000.00		\$0.00	
Flexible Air Transmission Line - dielectric, 3"	\$41,300.00	\$54,000.00	Cost includes line and all accessories needed for installation.	\$0.00	N/A
Primary Transmission Line	\$242,400.00	\$0.00		\$0.00	
Rigid Transmission Line - copper, 6 1/8"	\$242,400.00	\$0.00	Station is not getting new primary transmission line	\$0.00	N/A
Sub-total	\$283,700.00	\$54,000.00	N/A	\$0.00	N/A
Total for all systems	\$4,343,681.08	\$2,977,622.22	N/A	\$1,845,308.34	N/A

Components

Actual Information Description	File Name
Flexible Air Transmission Line - dielectric, 3"	Information not provided.

Rigid Transmission Line copper, 6 1/8" **Component Description:** WIYC is not installing new line. These costs were moved. Please delete Amount: N/A **Component Description:** WIYC is not installing new line. These costs were moved. Please delete

Amount: N/A

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 Justification
Primary Tower TOWER	\$3,333,460.00	\$2,275,260.00		\$1,525,654.35	
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$25,600.00	N/A	\$0.00	N/A
Tall Tower (greater than 500')	\$210,500.00	\$205,000.00	N/A	\$0.00	N/A
Tower Mapping-TIA	\$15,000.00	\$15,000.00	See Spartacus Gin Pole LLC proposals (job number) SGP005-A and SGP002, pluse estimated taxes.	\$14,575.00	Cost Section is for both TIA Inspection and Tower Mapping. Invoices SGP0007 and SGP0012

Tower Geotech Report	\$11,000.00	\$11,000.00	See Spartacus Gin Pole LLC proposal (job number) SGP003, plus estimated taxes.	\$9,797.70	Uploaded requested info. (Quote)
Structural Analysis	\$7,000.00	\$7,000.00	N/A	\$5,775.00	Uploaded requested info. (Quote)
Tower Modification Design	\$11,660.00	\$11,660.00	See Spartacus Gin Pole LLC proposal (job number) SGP0015 plus estimated taxes.	\$11,660.00	Uploaded requested info (Quote)
Tower Modifications	\$2,000,000.00	\$2,000,000.00	See Spartacus Gin Pole LLC proposal (job number SGP022, plus estimated taxes and freight.	\$1,483,846.65	Uploaded requested information. (Quote)
Serious tower reinforcement /modifications	\$1,052,000.00	\$0.00	Post no invoices in this category	\$0.00	N/A
Sub-total	\$3,333,460.00	\$2,275,260.00	N/A	\$1,525,654.35	N/A
Total for all systems	\$4,343,681.08	\$2,977,622.22	N/A	\$1,845,308.34	N/A

Components

Actual Information Description	File Name	
Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study	Information not provided.	
Tall Tower (greater than 500')	Information not provided.	
Tower Mapping-TIA		
	Component Description: Amount:	Tower TIA- Mapping \$10,725.00
	Component Description:	Tower TIA
		Inspection
	Amount:	\$3,850.00
Tower Geotech Report		
	Component Description: Amount:	GeoTech Report \$9,797.70
Structural Analysis		
	Component Description:	Tower Structural
		Analysis
	Amount:	\$5,775.00
Tower Modification Design		
	Component Description: Amount:	Tower Mod Design \$11,660.00

Tower Modifications		
	Component Description:	Tower
		Modification- 50%
		down for
		Mobilization and
		Materials.
	Amount:	\$989,231.10
	Component Description:	Tower
		Modifications
	Amount:	\$494,615.55
Serious tower reinforcement		
modifications	Component Description:	Please deny this
		invoice.
	Amount:	N/A

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	\$203,660.00	\$205,895.00		\$6,764.60	
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,305.00	N/A	\$0.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,120.00	N/A	\$0.00	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,535.00	N/A	\$0.00	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,070.00	N/A	\$0.00	N/A

Total for all systems	\$4,343,681.08	\$2,977,622.22	N/A	\$1,845,308.34	N/A
Sub-total	\$203,660.00	\$205,895.00	N/A	\$6,764.60	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$81,900.00	N/A	\$0.00	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,585.00	N/A	\$0.00	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,535.00	N/A	\$0.00	N/A
Project management of the transition	\$94,010.00	\$99,675.00	Please see the Widelity Quote	\$3,015.78	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,170.00	N/A	\$3,748.82	N/A

Components

Actual Information Description	File Name
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Perform engineering study		
for new channel assignment	Component Description:	Repack
and antenna development		Engineering
	Amount:	\$975.00
	Component Description:	Repack
		Engineering
	Amount:	\$2,773.82
Project management of the transition		
transition	Component Description:	Project
	Amount:	Management \$2,833.55
	Amount.	φ2,633.33
	Component Description:	Repack
		Engineering
	Amount:	\$182.23
Prepare request for Special Temporary Authorization	Information not provided.	
Attorney Fees - Prepare and	Information not provided.	
File request for Special Temporary Authorization		
Comprehensive coverage verification via field study, if	Information not provided.	

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	\$33,250.00	\$32,950.00		\$2,950.00	
DTV Medical Facility Notification	\$11,550.00	\$11,250.00	N/A	\$2,950.00	N/A
Equipment Delivery and Handling Charges	\$2,500.00	\$2,500.00	N/A	\$0.00	N/A
MVPD Notification of Channel Change	\$3,000.00	\$3,000.00	N/A	\$0.00	N/A
Develop and air announcement of upcoming channel change	\$1,200.00	\$1,200.00	N/A	\$0.00	N/A
Equipment Storage	\$15,000.00	\$15,000.00	N/A	\$0.00	N/A
Sub-total	\$33,250.00	\$32,950.00	N/A	\$2,950.00	N/A
Total for all systems	\$4,343,681.08	\$2,977,622.22	N/A	\$1,845,308.34	N/A

Components

Actual Information	
Description	File Name

DTV Medical Facility Notification	Component Description: Amount:	Medical Notification \$2,950.00
Equipment Delivery and Handling Charges	Information not provided.	
MVPD Notification of Channel Change	Information not provided.	
Develop and air announcement of upcoming channel change	Information not provided.	
Equipment Storage	Information not provided.	

Cost Information

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$4,343,681.08	\$2,977,622.22	\$1,845,308.34

Reimbursem	envestiatus	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

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. David Woods President

01/20/2020

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. David Woods

President

01/20/2020

Attachments