(REFERENCE COPY - Not for submission)

## FCC Form 399:

Reimbursement Request

| Facility | $\mathbf{3 5 5 8 4}$ | Service: DTV | Call <br> Sign: | KSAX | Channel: $\mathbf{2 4}$ (UHF) |
| :--- | :--- | :--- | :--- | :--- | :--- |
| ID: |  |  |  |  |  |
| File | 0000025416 |  |  |  |  |
| Number: |  |  |  |  |  |
| FRN: $\mathbf{0 0 0 2 6 2 9 5 6 6}$ | Date | $\mathbf{0 4 / 1 4}$ |  |  |  |
|  |  | Submitted: | $/ \mathbf{2 0 2 0}$ |  |  |


| Applicant <br> Information | Applicant Name, Type, and Contact Information |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
|  | Applicant | Address | Phone | Email | Applicant <br> Type |
|  | KSAX-TV, INC. | Ryan Vandewiele | $+1(651)$ | RVandewiele@hbi. | Corporation |
|  | Doing Business | 3415 | $642-4334$ | com |  |
|  | As: KSAX-TV, INC. | UNIVERSITY |  |  |  |
|  |  |  | AVE., WEST |  |  |

## Reimbursement Roimbursement Contact Name and Information

Applicant Address Phone Email
[Confidential]

| Preparer Contact Information | Preparer Contact Name and Information |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | Applicant | Address | Phone | Email |
|  | Charles R. | Charles Naftalin | +1 (202) 955- | charles. |
|  | Naftalin | Holland \& Knight, 800 17th | 3000 | naftalin@hklaw.com |
|  | LEGAL COUNSEL | Street, NW |  |  |
|  | HOLLAND \& | Suite 1100 |  |  |
|  | KNIGHT LLP | Washington, DC 20006 |  |  |
|  |  | United States |  |  |


| Broadcaster <br> Information <br> and <br> Transition | Question the station be sharing equipment with <br> another broadcast television station or <br> stations (e.g., a shared antenna, co-location <br> on a tower, use of the same transmitter <br> room, multiple transmitters feeding a <br> combiner, etc.)? If yes, enter the facility ID's <br> of the other stations and click 'prefill' to <br> download those stations' licensing <br> information. | No |
| :--- | :--- | :--- |
|  | Briefly describe transition plan |  |


| Transmitters | Section | Question | Response |
| :--- | :--- | :--- | :--- |
| Transmitter Related <br> Expenses | Do you have transmitter related expenses? | Yes |  |

Primary
Transmitter
Existing Transmitter Information

| Section | Question | Response |
| :---: | :---: | :---: |
| Existing Transmitter Description | Type of change | Purchase <br> 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 |  |
|  | Model | DHD-15P1 |
|  | Year | 2002 |
|  | Type | Solid State |
|  | Solid State Cooling | Air Cooled |
|  | Solid State Power Capacity | 15 kW |


| Primary <br> Transmitter <br> New Transmitter Costs <br> Section <br> New Transmitter | Use |  |
| :--- | :--- | :--- | :--- |
|  | Question | Response |
|  | Change Type | Primary <br> (Main) |
|  | Is this a request for upgraded equipment? | No |
|  | Manufacturer | New |


| 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 |



Primary
Other Transmitter Cost Not Listed
Transmitter Information not provided.

| Interim Transmitter | New Transmitter Costs |  |  |
| :---: | :---: | :---: | :---: |
|  | Section | Question | Response |
|  | New Transmitter | Use | Interim |
|  |  | Description of Use | N/A |
|  |  | Change Type | Purchase |
|  |  | Manufacturer |  |
|  |  | Model | Maxiva UAXTE12R44 |
|  |  | Transmitter Type | Solid State |
|  |  | Solid State Cooling | Air Cooled |
|  |  | Solid State Power capacity | 7.2 kW |
|  |  | Justification for New Transmitter | Because the catalog doesn't list a $7-8 \mathrm{~kW}$ air-cooled solid state transmitter, a GatesAir quote has been provided. See Exhibit 1. |


| Interim <br> Transmitter <br> Other Transmitter Costs | Question |  | Response |  |
| :--- | :--- | :--- | :--- | :--- |
|  | Section | 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 |
|  | 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 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 |
| Inside RF System | Is an additional interior RF system required to support this interim transmitter? | Yes |

## Interim

## Other Transmitter Cost Not Listed

Transmitter Information not provided.

## Antennas

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

Primary Antenna

Existing Antenna Information

| Section | Question | Response |
| :---: | :---: | :---: |
| Existing Antenna Description | Type of change | Purchase <br> 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? | No |
|  | Is antenna in operating condition? | Yes |
|  | Is antenna located on or in close proximity to an antenna farm? | No |
| Existing Antenna <br> Manufacturer and Type | Class | Full Power |
|  | Mounting | Top Mount |
|  | Antenna position in stack | Not in Stack |
|  | Polarization | Horizontal |
|  | Type | Slotted <br> 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) | 80.0 kW |


| Manufacturer |  |
| :--- | :--- |
| Model | TFU-25J |
| Year | 1985 |


| Section | Question | Response |
| :---: | :---: | :---: |
| New Antenna Description | Use | Primary <br> (Main) |
|  | Description of Use | N/A |
|  | Change Type | Purchase <br> New |
|  | Is this a request for upgraded equipment? | Yes |
|  | Ownership | Owned |
|  | Owner | N/A |
|  | Is antenna shared? | No |
|  | Is antenna directional? | No |
|  | Will antenna be located on or in close proximity to an antenna farm? | No |
| New Antenna <br> Manufacturer and Types | Class | Full Power |
|  | Mounting | Top Mount |
|  | Antenna position in stack | Top |
|  | Polarization | Elliptical |
|  | Type | Slotted <br> 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) | 55.3 kW |
|  | Manufacturer |  |


| Model | ATW22H3- <br> ETO-24L |
| :--- | :--- |
| Year | 2017 |
| Justification for New Antenna | Existing <br> antenna is <br> unable to <br> be re-tuned <br> to new <br> repacked <br> channel. <br> See Exhibit <br> 1. |

Primary Antenna

Other Antenna Costs

| Section | Question | Response |
| :--- | :--- | :--- |
| Combiner for Shared <br> Antenna | Do you need a Combiner for a Shared <br> Antenna? |  |
| Type | N/A |  |
|  | Number of channels supported | N/A |
|  | Frequencies of channels supported | N/A |
|  | Frequency | N/A |
|  | Do you need a combiner output splitter <br> /switcher for dual feed lines? | Yes |
| Elbow Complex | Do you require the separate purchase of <br> the Elbow Complex? | Single <br> Channel |
|  | Broadband or Single Channel? | $41 / 16$ |
| inches |  |  |
| inches |  |  |


| Sweep Test | Do you require the sweep testing of <br> transmission line and antenna? | Yes |
| :--- | :--- | :--- |

Primary Other Antenna Cost Not Listed

Antenna Information not provided.

| Section | Question | Response |
| :---: | :---: | :---: |
| New Antenna Description | Use | Interim |
|  | Description of Use | N/A |
|  | Change Type | Purchase <br> 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 <br> Manufacturer and Type | Class | Full Power |
|  | Mounting | Side Mount |
|  | Antenna position in stack | Not in Stack |
|  | Polarization | Horizontal |
|  | Type | Slotted Coaxial |
|  | Number of Stations Supported | N/A |
|  | Number of Panels/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) | 80.0 kW |
|  | Manufacturer |  |
|  | Model | $\begin{aligned} & \text { ALP32L3- } \\ & \text { HSO-42 } \end{aligned}$ |
|  | Year | 2017 |


| Justification for New Antenna | Interim <br> antenna is <br> necessary <br> to avoid <br> loss of <br> broadcast <br> service <br> during <br>  <br> transition to <br> new <br>  <br> (repacked) <br> channel. <br>  <br>  <br>  <br>  <br>  <br>  <br>  |
| :--- | :--- |


| 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? | 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 |

Interim Other Antenna Cost Not Listed
Antenna
Information not provided.

| TransmissionSeffiien | Question | Response |
| :---: | :--- | :--- |
| Transmission Line <br> Related Expenses | Do you have transmission line related <br> expenses? | Yes |


| Primary Existing Transmission Line |  |  |
| :---: | :---: | :---: |
| Transmission Setition $^{\text {a }}$ | Question | Response |
| Existing Transmission Line Description | Type of change | Purchase <br> New |
|  | Use | Primary (Main) |
|  | Description of Use | N/A |
|  | Ownership | Owned |
|  | Owner | N/A |
|  | Site | N/A |
|  | Is the existing transmission line shared with another station or stations? | No |
|  | Is Transmission Line in operating condition? | Yes |
| Existing Transmission Line Manufacturer and Type | Manufacturer |  |
|  | Type | Waveguide |
|  | Diameter | N/A |
|  | Other Diameter | N/A |
|  | Segment Length | N/A |
|  | Other Segment Length | 11.95 feet |
|  | Number of parallel runs | 1 |
|  | Length | 1250 feet per run |


| Primary New Transmission Line |  |  |
| :---: | :---: | :---: |
| Transmission Seiftion $^{\text {New Transmission Line }}$Costs | Question | Response |
|  | Use | Primary (Main) |
|  | Description of Use | N/A |
|  | Change Type | Purchase <br> New |
|  | Is this a request for upgraded equipment? | No |
|  | Type | Rigid |
|  | Diameter | $\begin{aligned} & 41 / 16 \\ & \text { inches } \end{aligned}$ |
|  | 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 | Current transmission line could not be used due to frequency change. See Exhibit 1. |

Primary
Transmissionnloimetion not provided.

| Interim New Transmission Line |  |  |
| :---: | :---: | :---: |
| Transmissiondeintôn <br> New Transmission Line Costs | Question | Response |
| New Transmission Line Costs | Use | Interim |
|  | Description of Use | N/A |
|  | Change Type | Purchase <br> New |
|  | Type | Rigid |
|  | Diameter | $61 / 8$ inches |
|  | Segment Length | $20^{\prime}$ |
|  | Other Segment Length |  |
|  | Number of parallel runs | 1 |
|  | Length | 1100 feet per run |
|  | Justification for New Transmission Line | Additional transmission line needed for interim facility to facilitate smooth transition to new channel. See Exhibit 1. |

## Interim

Transmissionnbimetion not provided.

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

Primary Tower

## Existing Tower

| Section | Question | Response |
| :---: | :---: | :---: |
| Existing Tower Description | Type of change | Modify <br> 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? | No |
|  | Is tower compliant with Rev G? | Unknown |
| Existing Tower Structure Registration | Do you have a tower registration number? | Yes |
|  | ASR Number | 1025694 |
| Coordinates (NAD83 ( North American Datum of 1983)) | Latitude (NAD83) | $\begin{aligned} & 45^{\circ} 41^{\prime} \\ & 59.0^{\prime \prime} \mathrm{N} \end{aligned}$ |
|  | Longitude (NAD83) | $\begin{aligned} & 095^{\circ} 10 ' \\ & 36.0^{\prime \prime} \mathrm{W} \text { - } \end{aligned}$ |
|  | Overall Structure Height | 1191.91 feet |
|  | Support Structure Height | 1139.75 feet |
|  | Ground Elevation Above Mean Sea Level (AMSL) | 1356.94 feet |


| Structure Type | TOWER - <br> Free <br> Standing or <br> Guyed <br> Structure |
| :--- | :--- |
| Tower Owner | KSAX-TV, <br> INC. |
| Date Constructed | $09 / 01 / 1987$ |

Primary
Tower

Primary Tower

## Other Tower Expenses Not Listed

Tower
Information not provided.

| Outside Section | Question | Response |
| :---: | :---: | :---: |
| Professional Services Costs Outside Project <br> Management Services | Do you require outside project management services? | No |
|  | Number of Hours | N/A |
|  | Explanation | N/A |
| 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 Services | Prepare and file Form FCC Construction Permit Application | Yes |
|  | For Auxiliary Facility | No |
|  | For Main Facility | Yes |
|  | Prepare and file Form FCC License to Cover Application | Yes |
|  | For Auxiliary Facility | No |
|  | For Main Facility | Yes |



## Outside

 Other Professional Services Expenses Not Listed
## Professional §efryje Costs

## Coverage Verification, Interim Antenna

## Internal Staff Work

RF exposure measurements, interim antenna

Outside Legal Analysis and Advice

## Description

Coverage verification (field study) for interim antenna operations. See Exhibit 1.

See Exhibit 1.

RF exposure measurements for interim antenna operations. See Exhibit 1.

Analysis and guidance provided by outside legal counsel with respect to repacking deadlines and other FCC requirements. See Exhibit 2 (Jan 2018).
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 | Yes |
| Other Miscellaneous Expenses | Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)? | Yes |
|  | Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs? | Yes |
|  | Does this relocation require Equipment Storage? | Yes |
|  | Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change? | Yes |
|  | Does this relocation require MVPD Notification of a Channel Change? | Yes |


| Other | Other Expenses Not Listed |  |
| :--- | :--- | :--- |
| Expenses | Name | Description |
|  | Remote control needed to comply with FCC <br> requirements for main studio control of <br> transmitters. |  |

## Transmitters

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

| Description | Predetermined Cost Estimate | Estimated <br> Cost | Estimated <br> Cost <br> Justification | Actual Cost | Actual Cost Justification |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Interim <br> Transmitter Maxiva <br> UAXTE- <br> 12R44 | \$396,812.39 | \$389,312.39 |  | \$0.00 |  |
| UHF - Air <br> Cooled <br> Solid State <br> Transmitter <br> 7.2 kW | \$249,312.39 | $\$ 249,312.39$ | See Exhibit <br> 1 (and including estimated state sales tax). | \$0.00 | N/A |
| UHF inside RF system including switching | \$147,500.00 | \$140,000.00 | N/A | N/A | N/A |
| Primary <br> Transmitter <br> THU9evo-4 | \$286,170.00 | \$286,170.00 |  | \$278,504.95 |  |
| UHF - <br> Liquid <br> Cooled <br> Solid State <br> Transmitter $4.9 \text {. } 6.5 \text { kW }$ | \$273,500.00 | \$273,500.00 | N/A | \$265,834.95 | N/A |
| Other <br> Electrical <br> Service: <br> Electrical <br> service <br> related to a <br> transformer <br> of a size <br> not <br> specified <br> above. | \$12,670.00 | \$12,670.00 | N/A | \$12,670.00 | N/A |
| Sub-total | \$682,982.39 | \$675,482.39 | N/A | \$278,504.95 | N/A |

Total for $\$ 2,326,105.88 \quad \$ 2,243,609.16 \quad$ N/A $\$ 1,193,440.94 \quad$ N/A
all
systems

## Components

| Actual Information Description | File Name |  |
| :---: | :---: | :---: |
| UHF - Air Cooled Solid State Transmitter 7.2 kW | Information not provided. |  |
| UHF inside RF system including switching | Information not provided. |  |
| UHF - Liquid Cooled Solid State Transmitter 4.9.6.5 kW | Component Description: <br> Amount: <br> Component Description: <br> Amount: | Work performed on primary transmitter. \$24,285.19 <br> Materials for transmission line components that will connect the new channel 24 transmitter to the new channel 24 antenna. \$2,158.88 |
|  | Component Description: Amount: | Materials are for transmission line components that will connect the new channel 24 transmitter to the new channel 24 antenna. \$5,532.11 |


| Component Description: | Work performed on primary transmitter. |
| :---: | :---: |
| Amount: | \$145,711.10 |
| Component Description: | Work performed on the primary transmitter. |
| Amount: | \$72,855.55 |
| Component Description: | One cable attenuator for connnecting nonlinear sample to transmitter; one cable for monitoring forward RF power; and one cable for monitoring reflected power. |
| Amount: | \$480.63 |
| Component Description: | One of multiple invoices under PO \#106640 for the KSAX new primary channel 24 transmitter. |
| Amount: | \$14,811.49 |

Other Electrical Service:
Electrical service related to a transformer of a size not specified above.

| Component Description: | Work performed <br> on the station's <br> primary |
| :--- | :--- |
|  | transmitter. <br> $\$ 2,670.00$ |
| Amount: |  |
| Component Description: | Work performed <br> on the station's <br> primary |
|  | transmitter. <br> $\$ 10,000.00$ |
| Amount: |  |

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

| Description | Predetermined Cost Estimate | Estimated <br> Cost | Estimated <br> Cost <br> Justification | Actual Cost | Actual Cost Justification |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Interim <br> Antenna <br> ALP32L3- <br> HSO-42 | \$124,540.00 | \$95,926.70 |  | \$70,792.93 |  |
| Sweep test of existing antenna | $\$ 6,730.00$ | $\$ 10,204.38$ | Please see <br> attached letter dated April 29, 2019. | \$10,204.38 | Please see letter attached to Electronics Research, Inc., - Inv 52367 dated November 30, 2018. |
| Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost) | \$5,260.00 | \$2,500.00 | N/A | N/A | N/A |
| Side mount brackets for high power antennas (if not included in antenna base cost) | \$23,150.00 | \$14,977.00 | N/A | N/A | N/A |


| UHF - | \$89,400.00 | \$68,245.32 | N/A | \$60,588.55 | N/A |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Lower |  |  |  |  |  |
| Power |  |  |  |  |  |
| Side |  |  |  |  |  |
| Mount, |  |  |  |  |  |
| One |  |  |  |  |  |
| station |  |  |  |  |  |
| antenna - |  |  |  |  |  |
| medium |  |  |  |  |  |
| power (50- |  |  |  |  |  |
| 200 kW), |  |  |  |  |  |
| horizontally |  |  |  |  |  |
| polarized |  |  |  |  |  |
| Primary | \$305,800.00 | \$253,723.18 |  | \$179,671.55 |  |
| Antenna |  |  |  |  |  |
| ATW22H3- |  |  |  |  |  |
| ETO-24L |  |  |  |  |  |
| Elbow | \$9,570.00 | \$5,000.00 | N/A | N/A | N/A |
| complex, |  |  |  |  |  |
| single |  |  |  |  |  |
| channel, at |  |  |  |  |  |
| antenna |  |  |  |  |  |
| input, per 4 |  |  |  |  |  |
| 1/16. |  |  |  |  |  |
| feedline (if needed) |  |  |  |  |  |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | \$3,750.00 | N/A |
| UHF - High | \$289,500.00 | \$242,323.18 | N/A | \$175,921.55 | N/A |
| Power Top |  |  |  |  |  |
| Mount |  |  |  |  |  |
| (200-1000 |  |  |  |  |  |
| kW), One |  |  |  |  |  |
| station |  |  |  |  |  |
| antenna, |  |  |  |  |  |
| elliptically |  |  |  |  |  |
| or |  |  |  |  |  |
| circularly |  |  |  |  |  |
| polarized |  |  |  |  |  |
| Sub-total | \$430,340.00 | \$349,649.88 | N/A | \$250,464.48 | N/A |
| Total for all | \$2,326,105.88 | \$2,243,609.16 | N/A | \$1,193,440.94 | N/A |
| systems |  |  |  |  |  |

Components

| Actual Information <br> Description | File Name |  |
| :--- | :--- | :--- |
| Sweep test of existing <br> antenna | Component Description: | Portion of work <br> regarding the <br> system sweep of <br> the interim <br> antenna. <br> $\$ 3,125.00$ |

UHF - Lower Power Side
Mount, One station antenna

- medium power (50-200
kW), horizontally polarized

| Component Description: | Portion of invoice <br> for work <br> performed on <br> interim antenna. |
| :--- | :--- |
|  | $\$ 37,601.05$ |


| Component Description: | Portion of invoice <br> for work <br> performed on <br> interim antenna. |
| :--- | :--- |
|  | $\$ 22,987.50$ |

Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)

Sweep test of existing antenna

Portion of invoice for work performed on sweet test of primary antenna.
Amount: \$3,750.00

| Component Description: | Portion of invoice <br> regarding sweep <br> test of the primary <br> antenna. |
| :--- | :--- |
| Amount: | $\$ 1,875.00$ |

UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized

| Component Description: | Remove existing primary 42 top mount antenna and install new Ch. 24 top mount antenna and transmission line. |
| :---: | :---: |
| Amount: |  |
| Component Description: | Portion of invoice for work performed on primary antenna. <br> Please see attached cover letter. |
| Amount: | \$103,686.40 |
| Component Description: Amount: | Portion of invoice for work performed on the primary antenna. \$49,836.00 |
| Component Description: | Please see attached cover letter. |
| Amount: | \$14,235.15 |
| Component Description: Amount: | Work performed on the station's primary antenna. \$8,301.69 |
| Component Description: | Installation of 50' |
|  | ERI top mounted TV antenna. |
| Amount: | \$13,000.00 |

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

| Description | Predetermined Cost Estimate | Estimated <br> Cost | Estimated <br> Cost <br> Justification | Actual Cost | Actual Cost Justification |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Interim <br> Transmission <br> Line | \$222,200.00 | \$177,998.00 |  | \$175,056.10 |  |
| Rigid <br> Transmission <br> Line - <br> copper, 6 1/8" | \$222,200.00 | \$177,998.00 | N/A | \$175,056.10 | N/A |
| Primary <br> Transmission <br> Line | \$170,400.00 | \$118,725.40 |  | \$76,465.27 |  |
| Rigid <br> Transmission Line copper, 41 /16" | \$170,400.00 | \$118,725.40 | Please see attached quote for the updated cost information, which remains far less than the default cost for this line item. | \$76,465.27 | N/A |
| Sub-total | \$392,600.00 | \$296,723.40 | N/A | \$251,521.37 | N/A |
| Total for all systems | \$2,326,105.88 | \$2,243,609.16 | N/A | \$1,193,440.94 | N/A |

## Components

Rigid Transmission Line copper, 6 1/8"

| Component Description: | Portion of invoice for work performed on interim transmission line. |
| :---: | :---: |
| Amount: | \$87,528.05 |
| Component Description: | Portion of invoice for work performed on interim transmission line. |
| Amount: |  |

Rigid Transmission Line copper, 4 1/16"

| Component Description: | Hardware and tools needed for installing transmission line on KSAX transmitter. |
| :---: | :---: |
| Amount: | \$45.76 |
| Component Description: | Equipment for the station's primary transmission line. |
| Amount: |  |
| Component Description: | Portion of invoice for work performed on primary transmission line. |
| Amount: | \$71,235.24 |
| Component Description: | Cost of additional parts for the station's primary transmission line. |
| Amount: | \$3,002.53 |
| Component Description: | Portion of invoice for work performed on primary transmission line. |
| Amount: | \$35,617.62 |

## Tower Equipment and Rigging Costs

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

| Description | Predetermined Cost Estimate | Estimated <br> Cost | Estimated <br> Cost <br> Justification | Actual Cost | Actual Cost Justification |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Primary Tower TOWER | \$481,800.00 | \$462,000.00 |  | \$224,963.55 |  |
| Tall Tower (greater than 500') | \$210,500.00 | \$200,000.00 | N/A | N/A | N/A |
| Tower Helicopter Lift | \$87,000.00 | \$87,000.00 | N/A | \$74,000.00 | N/A |
| Tower <br> mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study | \$26,300.00 | \$25,000.00 | N/A | \$7,000.00 | N/A |
| Minor tower reinforcement /modifications | \$158,000.00 | \$150,000.00 | N/A | \$143,963.55 | N/A |
| Sub-total | \$481,800.00 | \$462,000.00 | N/A | \$224,963.55 | N/A |
| Total for all systems | \$2,326,105.88 | \$2,243,609.16 | N/A | \$1,193,440.94 | N/A |

## Components

| Actual Information <br> Description | File Name |
| :--- | :--- |
| Tall Tower (greater than <br> 500 | Information not provided. |

Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study

Minor tower reinforcement /modifications

| Component Description: Amount: | Helicopter rental for placement of 50' antenna. The helicopter lift was determined to be necessary to meet the FCC repacking deadline. See attached letter and quotes. |
| :---: | :---: |
| Component Description: Amount: | Tower mapping \$7,000.00 |
| Component Description: | Design structural modifications as required by structural analysis results and prepare modification working drawings and technical specification notes. |
| Amount: | \$7,000.00 |
| Component Description: | Work performed regarding the installation of the interim antenna, including labor, subsistence, job materials and tax. |
| Amount: | \$62,052.72 |


| Component Description: | Modification materials per Malouf Engineering (includes tax). |
| :---: | :---: |
| Amount: | \$6,790.83 |
| Component Description: | Perform structural analysis and engineering report. |
| Amount: | \$6,000.00 |
| Component Description: | Perform top section, plate structural analysis and structural reanalysis of site for new scenario. |
| Amount: | \$5,500.00 |
| Component Description: | Items for tower modification to allow structure to support the primary and interim antennas. |
| Amount: | \$33,620.00 |
| Component Description: | Costs to remove side mounted interim TV antenna, 6 " rigid coax line, hangers, and all associated hardware from KSAX tower. |
| Amount: | \$23,000.00 |

## Outside Professional Services

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

|  | Predetermined <br> Cost Estimate | Estimated <br> Cost | Estimated Cost <br> Justification | Actual Cost | Actual C <br> Justifica |
| :--- | :---: | :--- | :--- | :--- | :--- |
|      <br> Outside $\$ 270,071.50$ $\$ 391,786.50$  $\$ 159,098.62$ |  |  |  |  |  |
| Professional <br> Services |  |  |  |  |  |


| Prepare and or review reimbursement form | \$2,630.00 | \$122,771.75 | See Exhibit 2 | \$120,245.75 | See Exh |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | (January 2018) |  | Costs inc |
|  |  |  | and quote |  | signific |
|  |  |  | attached to |  | revisior |
|  |  |  | invoices. |  | reimburs |
|  |  |  |  |  | form di |
|  |  |  |  |  | chang $\epsilon$ |
|  |  |  |  |  | repacl |
|  |  |  |  |  | facility d |
|  |  |  |  |  | anc |
|  |  |  |  |  | respond |
|  |  |  |  |  | FCC req |
|  |  |  |  |  | (and cha |
|  |  |  |  |  | conté |
|  |  |  |  |  | informa |


| Outside Legal | \$16,067.50 | \$16,067.50 | These costs | \$15,725.50 | See Exr |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Analysis and |  |  | were incurred |  |  |
| Advice |  |  | in obtaining |  |  |
|  |  |  | advice from |  |  |
|  |  |  | outside |  |  |
|  |  |  | counsel |  |  |
|  |  |  | regarding the |  |  |
|  |  |  | FCC |  |  |
|  |  |  | requirements |  |  |
|  |  |  | other than the |  |  |
|  |  |  | Form 2100 or |  |  |
|  |  |  | reimbursement, |  |  |
|  |  |  | including |  |  |
|  |  |  | periodic |  |  |
|  |  |  | progress |  |  |
|  |  |  | reports, |  |  |
|  |  |  | repacking |  |  |
|  |  |  | deadlines and |  |  |
|  |  |  | other FCC |  |  |
|  |  |  | requirements. |  |  |
|  |  |  | See Exhibit 2. |  |  |


| Internal Staff Work | \$20,674.00 | \$20,674.00 | See Exhibit 1. | \$4,724.62 | Altho <br> subtotal <br> greater <br> appro' <br> estima <br> additic <br> explanal <br> provide <br> Exhibit ${ }^{\prime}$ <br> 2a. Exhi <br> links tr <br> expense <br> the cor <br> Internal <br> Invoi <br> (3558 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Coverage <br> Verification, Interim Antenna | \$80,000.00 | \$80,000.00 | See Exhibit 1. | N/A | $\mathrm{N} /$ / |
| RF Exposure Measurements | \$21,050.00 | \$20,000.00 | N/A | N/A | $\mathrm{N} / \mathrm{t}$ |
| Comprehensive coverage verification via field study, if needed | \$84,200.00 | \$80,000.00 | N/A | N/A | $\mathrm{N} / \mathrm{t}$ |
| Attorney Fees - <br> Prepare and <br> File request for <br> Special <br> Temporary <br> Authorization | \$3,680.00 | \$8,500.00 | See quote attached to invoices. | \$5,628.50 | $\mathrm{N} /$ / |
| Attorney Fees - <br> Prepare and <br> File FCC Form <br> 2100 (main), <br> License to <br> Cover <br> Application | \$2,365.00 | \$3,600.00 | Please see quote attached to invoices. | \$2,601.00 | $\mathrm{N} /$ / |



| Sub-total | $\$ 270,071.50$ | $\$ 391,786.50$ | $\mathrm{~N} / \mathrm{A}$ | $\$ 159,098.62$ | $\mathrm{~N} / t$ |
| :--- | :--- | :--- | :--- | :--- | :--- |
| Total for all <br> systems | $\$ 2,326,105.88$ | $\$ 2,243,609.16$ | $\mathrm{~N} / \mathrm{A}$ | $\$ 1,193,440.94$ | $\mathrm{~N} / t$ |

## Components

| Actual Information Description | File Name |  |
| :---: | :---: | :---: |
| Prepare and or review reimbursement form | Component Description: Amount: | Portion of invoice relevant to preparation of reimbursement form. $\$ 378.00$ |
|  | Component Description: Amount: | Portion of invoice relevant to preparation of reimbursement form. $\$ 1,198.00$ |
|  | Component Description: Amount: | Portion of invoice relevant to preparation of reimbursement form. $\$ 3,434.50$ |
|  | Component Description: Amount: | Portion of invoice relevant to preparation of reimbursement form. $\$ 8,234.50$ |


| Component Description: | Portion of invoice relevant to preparation for reimbursement form. |
| :---: | :---: |
| Amount: | \$159.00 |
| Component Description: | Portion of invoice relevant to review and preparation of reimbursement form. |
| Amount: | \$5,141.00 |
| Component Description: | Portion of invoice relevant to preparation of reimbursement form. |
| Amount: | \$7,085.50 |
| Component Description: | Portion of invoice relevant to preparation of reimbursement form. |
| Amount: | \$4,101.50 |
| Component Description: | Portion of invoice relevant to review and preparation of reimbursement form. |
| Amount: | \$1,716.00 |
| Component Description: | Portion of invoice relevant to preparation of reimbursement form. |
| Amount: | \$1,903.50 |


| Component Description: | Portion of invoice relevant to preparation of reimbursement form. |
| :---: | :---: |
| Amount: | \$4,657.00 |
| Component Description: | Portion of invoice relevant to preparation of reimbursement form. |
| Amount: | \$1,990.50 |
| Component Description: | Portion of invoice relevant to preparation of reimbursement form. |
| Amount: | \$3,115.50 |
| Component Description: | Portion of invoice relevant to review and preparation of reimbursement form. |
| Amount: | \$5,370.00 |
| Component Description: | Portion of invoice relevant to review and preparation of reimbursement form. |
| Amount: | \$6,523.00 |
| Component Description: | Portion of invoice relevant to preparation of reimbursement form. |
| Amount: | \$7,349.50 |


| Component Description: | Portion of form relevant to the review and preparation of reimbursement form. |
| :---: | :---: |
| Amount: | \$3,542.00 |
| Component Description: | Portion of invoice relevant to preparation of reimbursement form. |
| Amount: | \$562.00 |
| Component Description: | Portion of invoice relevant to preparation of reimbursement form. |
| Amount: | \$2,358.50 |
| Component Description: | Portion of invoice relevant to preparation of reimbursement form. |
| Amount: | \$79.50 |
| Component Description: | Portion of invoice relevant to preparation of reimbursement form. |
| Amount: | \$981.00 |


| Component Description: | Portion of invoice <br> relevant to preparation of reimbursement form. |
| :---: | :---: |
| Amount: | \$2,553.50 |
| Component Description: | Portion of invoice relevant to review and preparation of reimbursement form. |
| Amount: | \$8,196.50 |
| Component Description: Amount: | Portion of invoice relevant to preparation of reimbursement form. |
| Amount: | \$8,960.50 |
| Component Description: | Portion of invoice relevant to review and preparation of reimbursement form. |
| Amount: | \$658.50 |
| Component Description: | Portion of invoice relevant to reimbursement form. |
| Amount: | \$1,991.00 |
| Component Description: | Portion of invoice relevant to review and preparation of reimbursement form. |
| Amount: | \$13,829.00 |


| Component Description: | Portion of invoice relevant to preparation of reimbursement request |
| :---: | :---: |
| Amount: | \$7,757.50 |
| Component Description: | Portion of invoice relevant to preparation of reimbursement forms |
| Amount: | \$244.25 |
| Component Description: | Portion of invoice relevant to preparation and review of reimbursement forms, including responding to further FCC requests. |
| Amount: | \$252.50 |
| Component Description: | Portion of invoice relevant to preparation of reimbursement form. |
| Amount: | \$1,230.50 |
| Component Description: | Portion of invoice relevant to review and preparation of reimbursement information, including responses to FCC requests. |
| Amount: | \$4,338.00 |


|  | Component Description: <br> Amount: | Portion of invoice relevant to preparation of reimbursement form. $\$ 354.00$ |
| :---: | :---: | :---: |
| Outside Legal Analysis and Advice | Component Description: Amount: | Portion of invoice relevant to FCC transition requirement. \$715.50 |
|  | Component Description: Amount: | Portion of invoice relevant to FCC transition requirement. \$3,796.50 |
|  | Component Description: Amount: | Portion of invoice relevant to FCC transition requirement. \$155.00 |
|  | Component Description: Amount: | Portion of invoice relevant to FCC transition requirement. \$342.00 |
|  | Component Description: <br> Amount: | Portion of invoice relevant to FCC transition requirement. \$1,026.00 |


| Component Description: | Portion of invoice relevant to FCC transition requirement. |
| :---: | :---: |
| Amount: |  |
| Component Description: | Portion of invoice relevant to FCC transition requirement. |
| Amount: | \$835.50 |
| Component Description: | Portion of invoice relevant to FCC transition requirement. |
| Amount: | \$79.50 |
| Component Description: | Portion of invoice relevant to FCC transition requirement. |
| Amount: | \$265.50 |
| Component Description: | Portion of invoice relevant to FCC transition requirement. |
| Amount: | \$1,840.00 |
| Component Description: | Portion of invoice relevant to FCC transition requirement. |
| Amount: | \$1,111.50 |



| Component Description: | Including pay stubs from an entity that is commonly owned with the licensee KSAX-TV, Inc. |
| :---: | :---: |
| Amount: | \$1,098.12 |
| Component Description: Amount: | Expenses related to repack project. $\$ 343.25$ |
| Component Description: Amount: | Ed Smith travel expenses (July 2018) $\$ 353.82$ |
| Component Description: | This material document summarizes costs, as reimbursed by licensee parent, for travel expenses for trip to KSAX <br> antenna site. <br> Supporting documentation for all expenses reimbursed is also attached. See also Exhibit 2a per staff request. \$222 91 |
| Component Description: | Including pay stubs from an entity that is commonly owned with the licensee of KSAXTV, Inc. |
| Amount: |  |


|  | Component Description: Amount: | Including pay stubs from an entity that is commonly owned with the licensee of KSAXTV, Inc. \$923.95 |
| :---: | :---: | :---: |
|  | Component Description: <br> Amount: | Cannot delete cost component section. Please disregard. N/A |
|  | Component Description: Amount: | Copy and document expenses for blueprint creation and transmission for new KSAX facility. $\$ 5.00$ |
| Coverage Verification, Interim Antenna | Information not provided. |  |
| RF Exposure Measurements | Information not provided. |  |
| Comprehensive coverage verification via field study, if needed | Information not provided. |  |


| Attorney Fees - Prepare and File request for Special Temporary Authorization | Component Description: <br> Amount: | Portion of invoice relevant to STA application. $\$ 1,669.00$ |
| :---: | :---: | :---: |
|  | Component Description: <br> Amount: | Portion of invoice relevant to preparation of STA application. \$556.50 |
|  | Component Description: <br> Amount: | Portion of invoice relevant to STA application. $\$ 1,506.50$ |
|  | Component Description: <br> Amount: | Portion of invoice relevant to preparation of STA application. \$1,896.50 |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Component Description: <br> Amount: | Portion of invoice relevant to preparation of license to cover application. \$2,601.00 |


| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | Component Description: Amount: | Portion of invoice relevant to preparation of construction permit application. $\$ 217.00$ |
| :---: | :---: | :---: |
|  | Component Description: Amount: | Portion of invoice relevant to construction permit work. <br> \$1,356.25 |
|  | Component Description: Amount: | Portion of invoice (as appropriately allocated and marked on invoice) relevant to construction permit work. $\$ 513.50$ |
|  | Component Description: Amount: | Portion of invoice (including allocations as marked on invoice) relevant to construction permit work. <br> \$4,639.50 |
|  | Component Description: Amount: | Portion of invoice (as appropriately allocated on invoice) relevant to construction permit work. <br> $\$ 447.00$ |
| Prepare request for Special Temporary Authorization | Information not provided. |  |


| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Component Description: <br> Amount: | Preparation of technical portion of application for license to cover construction permit for re-pack channel 24. <br> $\$ 750.00$ |
| :---: | :---: | :---: |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Component Description: <br> Amount: | Portion allocable to relevant line item. <br> The selected attachment has requested detail. Please ignore other versions of Invoice 240733. \$500.00 |


| Perform engineering study for new channel assignment and antenna development | Component Description: <br> Amount: | Engineering consultation for KSAX-TV FCC repack channel assignment. \$4,568.24 |
| :---: | :---: | :---: |
|  | Component Description: Amount: | Work performed regarding STA request for interim antenna. <br> $\$ 750.00$ |
|  | Component Description: Amount: | Portion allocable to relevant line item. <br> The selected attachment also has requested detail. Please ignore other versions of Invoice 240733. <br> \$1,000.00 |
| RF exposure measurements, interim antenna | Information not provided. |  |

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

| Description | Predetermined Cost Estimate | Estimated <br> Cost | Estimated <br> Cost <br> Justification | Actual Cost | Actual Cost Justification |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Other Expenses | \$68,311.99 | \$67,966.99 |  | \$28,887.97 |  |
| Transmitter control | \$4,580.00 | \$4,580.00 | See Exhibit 1. | N/A | N/A |
| MVPD <br> Notification of Channel Change | \$1,000.00 | \$1,000.00 | See Exhibit 1. | N/A | N/A |
| DTV Medical <br> Facility <br> Notification | \$11,550.00 | \$11,000.00 | N/A | \$3,750.00 | N/A |
| FCC Filing <br> Fees - Form 2100 license to cover application | \$335.00 | \$335.00 | N/A | \$335.00 | N/A |
| FCC Filing <br> Fees - Special Temporary Authorization request | \$195.00 | \$400.00 | Pursuant to FCC rules, the fee for filing STA applications is $\$ 200$. | \$400.00 | N/A |
| Develop and air announcement of upcoming channel change | \$4,100.00 | \$4,100.00 | See Exhibit 1. | N/A | N/A |


| Equipment <br> Storage | \$4,205.99 | \$4,205.99 | N/A | \$4,530.91 | Equipment storage costs were slightly higher than initially budgeted because equipment had to be stored longer than expected due to certain construction delays that were outside the control of the licensee. |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Disposal <br> Costs (for equipment and other waste, net of any salvage value) | \$7,146.00 | \$7,146.00 | See Exhibit <br> 1. | \$900.00 | N/A |
| Equipment <br> Delivery and <br> Handling <br> Charges | \$35,200.00 | \$35,200.00 | See Exhibit 1. | \$18,972.06 | N/A |
| Sub-total | \$68,311.99 | \$67,966.99 | N/A | \$28,887.97 | N/A |
| Total for all systems | \$2,326,105.88 | \$2,243,609.16 | N/A | \$1,193,440.94 | N/A |

## Components

| Actual Information <br> Description | File Name |
| :--- | :--- |
| Transmitter control | Information not provided. |
| MVPD Notification of <br> Channel Change | Information not provided. |


| DTV Medical Facility <br> Notification | Component Description: | Medical <br> notification <br> mailing. |
| :--- | :--- | :--- |
|  | Amount: | \$3,750.00 |


| Component Description: | Please see attached cover letter. |
| :---: | :---: |
| Amount: | \$299.26 |
| Component Description: | Please see attached cover letter. |
| Amount: | \$270.75 |
| Component Description: Amount: | Equipment storage. \$299.26 |
| Component Description: | Equipment storage (August 2019) |
| Amount: | \$299.26 |
| Component Description: | Storage equipment (August 2018) |
| Amount: | \$299.26 |
| Component Description: Amount: | Equipment storage (July 2019). $\$ 299.26$ |
| Component Description: | Equipment storage (October 2019) |
| Amount: | \$299.26 |
| Component Description: Amount: | Equipment storage. \$299.26 |



| Component Description: | Shipping cost relating to installation of interim antenna. |
| :---: | :---: |
| Amount: | \$55.00 |
| Component Description: | Portion of invoice <br> regarding <br> equipment <br> delivery and <br> handling charges <br> (primary antenna <br> and transmission <br> line). |
| Amount: | \$8,250.54 |
| Component Description: | Portion of invoice regarding equipment delivery and handling charges (interim antenna and transmission line). |
| Amount: | \$4,208.63 |
| Component Description: | Portion of invoice <br> regarding <br> equipment <br> delivery and <br> handling charges <br> (interim antenna <br> and transmission <br> line). |
| Amount: | \$4,208.63 |
| Component Description: | Freight cost for additional parts for the station's primary transmission line. |
| Amount: | \$128.22 |


| Component Description: | Freight for transmitter equipment. |
| :---: | :---: |
| Amount: | \$9.00 |
| Component Description: | Freight costs regarding the station's primary antenna. |
| Amount: | \$1,182.53 |
| Component Description: | Telehandler and forklift rental to load and unload equipment. Mr. Malecha owns the land where the KSAX tower is located. |
| Amount: | \$990.00 |

## Cost Information

Grand Total

|  | Predetermined <br> Cost Estimate | Estimated Cost | Actual Cost |
| :--- | :--- | :--- | :--- |
| Total for all systems | $\$ 2,326,105.88$ | $\$ 2,243,609.16$ | $\$ 1,193,440.94$ |

## Reimbursemefriestatus

The facility has ceased operating on its preauction channel.

Construction of final facilities or all necessary modifications are complete.

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.

## Response

Yes

No

No

## Certification

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.

$\left.$| 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. |$\quad$| Reclare, under penalty of perjury, that I am |
| :--- | \right\rvert\, | Ryan |
| :--- |
| Vandewiele |
| I dice |
| an authorized representative of the above- |
| named applicant for the Authorization(s) |
| specified above. |

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.
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.

| 8. The above-named |
| :--- |
| entity acknowledges |
| that overpayments or |
| payments in error |
| must be promptly |
| refunded to the |
| Commission. |
| 9.The above-named <br> entity certifies that it <br> is in full compliance <br> with all statutes, <br> rules, regulations <br> and governmental <br> requirements for <br> which compliance is <br> a prerequisite for <br> obtaining the <br> payments herein <br> requested. |
| I declare, under penalty of perjury, that I am <br> an authorized representative of the above- <br> named applicant for the Authorization(s) <br> specified above. |
| Ryan <br> Vandewiele |
| Vice |
| President |

## Attachments

