



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **86496** | Service: **DTV** | Call **WTPX-TV** | Channel: **19 (UHF)** |
ID: | Sign:
File **0000028674**
Number:
FRN: **0001808468** | Date **03/11**
Submitted: **/2020**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
ION TELEVISION LICENSE, LLC	601 CLEARWATER PARK ROAD	+1 (561) 682-4110	BIANCAFRYE@IONMEDIA.COM	Corporation
Doing Business As: ION TELEVISION LICENSE, LLC	WEST PALM BEACH, FL 33401			
	United States			

Reimbursement Contact Information

Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Information

Preparer Contact Name and Information

Applicant	Address	Phone	Email
The Preparer is same as the reimbursement contact.			

Broadcaster Information and Transition Plan

Question	Response
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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	Install interim antenna and operate utilizing current line and transmitter on pre repack channel. Replace current transmission line and side mount antenna, then re-tune solid state transmitter and cut over to operation on post repack channel.

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	Retune Existing
	Use	Primary (Main)
	Ownership	Owned
	Owner	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter Manufacturer and Type	Manufacturer	Rohde & Schwarz
	Model	NV 8303 E

Year	2010
Type	Solid State
Solid State Cooling	Air Cooled
Solid State Power capacity	1 kW

**Primary
Transmitter**

Retuning Transmitter Costs

Section	Question	Response
New IOT Tubes	Number of Tubes (including accessories) needed	N/A
New Mask Filter	Power	1.5 kW
	Other Power	N/A
New Exciter	Is a new exciter needed?	Yes
	Exciter Type	Dual exciter with changeover

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

Primary Transmitter

Other Transmitter Cost Not Listed

Name		Description
RF Interconnect		Interconnect between RF System and transmission line

Antennas

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

**Primary
Antenna**

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	50.0 kW

Manufacturer	
Model	ACS32D
Year	2001

Primary
Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	24.5 kW
	Manufacturer	

Model	TUA-C4SP-4/7M-1-SM
Year	2017
Justification for New Antenna	Current slot antenna cannot be re-channelled

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	3 1/8 inches inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	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

Primary Antenna	Other Antenna Cost Not Listed Information not provided.
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**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 Manufacturer and Type	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Slot
	Number of Stations Supported	1
	Number of Panels/Bays	8
	Lower Limit	470.00 MHz
	Upper Limit	698.00 MHz
	Design power capacity in use	25.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	25.0 kW
	Manufacturer	
	Model	TFU-WB-8
	Year	2017

	Justification for New Antenna	Interim antenna needed to complete move to new channel
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Interim Antenna

Other Antenna Costs

Section	Question	Response
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	S
	Feed Line Size	4 1/16 inches
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?	Yes

Interim Antenna

Other Antenna Cost Not Listed

Information not provided.

Transmission Line

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

Primary
Transmission Line

Existing Transmission Line

Section	Question	Response
Existing Transmission Line Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	Flexible Air
	Diameter	3 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	943 feet per run

Primary
Transmission Line

New Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Flexible Air
	Diameter	3 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	900 feet per run
	Justification for New Transmission Line	Current line will be utilized for the interim operation.

Primary
Transmission Line

Other Transmission Line Expenses Not Listed

Name	Description
Sweep existing transmission line	Sweep existing transmission line

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?	No
	One or more FM, AM or TV radio broadcaster(s)	N/A
	Others Types of Users	N/A
	Is tower documented for structural analysis?	Unknown
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1036068
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	45° 03' 33.0" N-
	Longitude (NAD83)	089° 26' 10.0" W-
	Overall Structure Height	1013.77 feet
	Support Structure Height	1010.49 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1464.88 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	NRG MEDIA, LLC
	Date Constructed	12/01/1984

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:	Major 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 Study	Structural analysis required after tower mapping completed

Interim antenna installation	Install interim antenna to operate on current channel. Remove interim antenna after commencement of operations on new main antenna.
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**Outside
Professional Services Costs**

Section	Question	Response
Outside Project 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

	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	Yes
	Environmental Assessment	Yes
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	Negotiation of Lease and other Matter for Shared Locations	Yes
	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	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Professional Services Costs **Other Professional Services Expenses Not Listed**

If wireless is not provided.

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	Yes
	Non-zoning permits	Yes
	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 Expenses	Other Expenses Not Listed
	Information not provided.

Cost Information

Transmitters

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmitter NV 8303 E	\$156,373.80	\$147,977.80		\$15,227.80	
1.5 kW mask filter	\$3,030.00	\$2,184.00	Please see attached Dielectric Quote #700139CMZ-3	\$2,184.00	N/A
RF Interconnect	\$793.80	\$793.80	Please see attached Dielectric Quote #700139CMZ-3 and Dielectric Change Order Dated 4-10-18.	\$793.80	N/A
Dual exciter system with change over	\$47,350.00	\$45,000.00	N/A	\$0.00	N/A
UHF and VHF - minor banding issues	\$105,200.00	\$100,000.00	N/A	\$12,250.00	N/A
Sub-total	\$156,373.80	\$147,977.80	N/A	\$15,227.80	N/A
Total for all systems	\$1,402,071.80	\$1,309,232.80	N/A	\$128,216.33	N/A

Components

Actual Information**Description****File Name**

1.5 kW mask filter

Component Description:

Balance payment for 1.5kW Mask Filter. Cover letter and supporting documentation are attached. This invoice has been paid.

Amount:

\$174.72

Component Description:

50% "with order" payment for 1.5kW Mask Filter. Cover letter and supporting documentation are attached. This invoice has been paid.

Amount:

\$1,092.00

Component Description:

Progress payment for 1.5kW Mask Filter. Cover letter and supporting documentation are attached. This invoice has been paid.

Amount:

\$917.28

Component Description:	50% "remaining balance" for 1.5kW Mask Filter from Dielectric. Detailed cost breakdown and supporting documentation attached. This invoice has been paid.
Amount:	\$1,092.00

Component Description:	50% deposit for 1.5 kW Mask Filter from Dielectric. Detailed cost breakdown and supporting documentation attached. This invoice has been paid.
Amount:	\$1,092.00

RF Interconnect	<div data-bbox="708 174 1378 566"> <p>Component Description: Balance payment for RF Interconnect (flanges). Cover letter and supporting documentation are attached. This invoice has been paid.</p> <p>Amount: \$467.52</p> </div> <div data-bbox="708 674 1378 1066"> <p>Component Description: Partial payment for RF Interconnect (flanges). Cover letter and supporting documentation are attached. This invoice has been paid.</p> <p>Amount: \$326.28</p> </div> <div data-bbox="708 1173 1378 1603"> <p>Component Description: Full cost of RF Interconnect - Coupler. Detailed cost breakdown and supporting change order and documentation attached. This invoice has been paid.</p> <p>Amount: \$793.80</p> </div>
Dual exciter system with change over	Information not provided.

UHF and VHF - minor banding issues	Component Description: Amount:	Full cost to re-tune R&S NV8303 transmitter. Supporting documentation and detailed scope of work attached. \$12,250.00
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Cost
Information

Antennas

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Interim Antenna TFU-WB-8	\$86,300.00	\$83,593.00		\$0.00	
Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	\$9,570.00	\$7,193.00	N/A	\$0.00	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$0.00	N/A
UHF - High Power, Side Mount, basic slot antenna, 8 bay,, 25 kW input, directional,, horizontally polarized	<i>\$70,000.00</i>	\$70,000.00	N/A	\$0.00	N/A
Primary Antenna TUA-C4SP- 4/7M-1-SM	\$71,308.00	\$53,972.00		\$38,372.00	

Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$3,404.00	Please see attached Dielectric Quote #700139CMZ-3	\$3,404.00	Both totals are \$3,131.68
Sweep test of existing antenna	\$6,730.00	\$9,600.00	Please see attached Dielectric Quote #700139CMZ-3 and WTPX Dielectric Reconciliation spreadsheet.	\$6,400.00	N/A
UHF - High Power, Side Mount, basic slot antenna, 25 kW input, directional,, elliptically or circularly polarized	\$28,568.00	\$28,568.00	Please see attached Dielectric Quote #700139CMZ-3	\$28,568.00	N/A
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	\$7,600.00	\$7,400.00	N/A	\$0.00	N/A

Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	\$0.00	N/A
Sub-total	\$157,608.00	\$137,565.00	N/A	\$38,372.00	N/A
Total for all systems	\$1,402,071.80	\$1,309,232.80	N/A	\$128,216.33	N/A

Components

Actual Information Description	File Name
Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	Information not provided.
Sweep test of existing antenna	Information not provided.
UHF - High Power, Side Mount, basic slot antenna, 8 bay,, 25 kW input, directional,, horizontally polarized	Information not provided.
Side mount brackets for high power antennas (if not included in antenna base cost)	<p>Component Description:</p> <p>Balance payment for Mount Brackets. Cover letter and supporting documentation are attached. This invoice has been paid.</p> <p>Amount:</p> <p>\$272.32</p>

Component Description:	50% "with order" payment for Mount Brackets. Cover letter and supporting documentation are attached. This invoice has been paid.
Amount:	\$1,702.00

Component Description:	Progress payment for Mount Brackets. Cover letter and supporting documentation are attached. This invoice has been paid.
Amount:	\$1,429.68

Component Description:	50% "remaining balance" payment on leg mount brackets for side mount antenna. Detailed cost breakdown and supporting documentation attached. This invoice has been paid.
Amount:	\$1,702.00

	<p>Component Description:</p> <p>50% deposit on leg mount brackets for side mount antenna. Detailed cost breakdown and supporting documentation attached. This invoice has been paid.</p> <p>Amount:</p> <p>\$1,702.00</p>
Sweep test of existing antenna	<p>Component Description:</p> <p>50% "remaining balance" payment on repack sweep of primary antenna operations. Detailed cost breakdown and supporting documentation attached. This invoice has been paid.</p> <p>Amount:</p> <p>\$3,200.00</p> <p>Component Description:</p> <p>50% "with order" payment for repack sweep. Cover letter and supporting documentation are attached. This invoice has been paid.</p> <p>Amount:</p> <p>\$3,200.00</p>

	<p>Component Description:</p> <p>Full cost to sweep main antenna. Explanation of variance and supporting documentation is attached. This invoice has been paid.</p> <p>Amount:</p> <p>\$3,200.00</p>
	<p>Component Description:</p> <p>50% deposit payment on repack sweep of primary antenna operations. Detailed cost breakdown and supporting documentation attached. This invoice has been paid.</p> <p>Amount:</p> <p>\$3,200.00</p>
UHF - High Power, Side Mount, basic slot antenna, 25 kW input, directional,, elliptically or circularly polarized	<p>Component Description:</p> <p>Balance payment for primary antenna. Cover letter and supporting documentation are attached. This invoice has been paid.</p> <p>Amount:</p> <p>\$2,285.44</p>

Component Description:	50% "with order" payment for primary antenna. Cover letter and supporting documentation are attached. This invoice has been paid.
Amount:	\$14,284.00

Component Description:	Progress payment for primary antenna. Cover letter and supporting documentation are attached. This invoice has been paid.
Amount:	\$11,998.56

Component Description:	50% "remaining balance" payment for primary antenna. Detailed cost breakdown and supporting documentation attached. This invoice has been paid.
Amount:	\$14,284.00

Component Description:	50% deposit for primary antenna. Detailed cost breakdown and supporting documentation attached. This invoice has been paid.
Amount:	\$14,284.00

Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	Information not provided.
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	Information not provided.

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	\$59,500.00	\$45,925.00		\$1,790.33	
Sweep existing transmission line	<i>\$6,400.00</i>	\$6,400.00	N/A	\$1,790.33	N/A
Flexible Air Transmission Line - dielectric, 3"	\$53,100.00	\$39,525.00	N/A	\$0.00	N/A
Sub-total	\$59,500.00	\$45,925.00	N/A	\$1,790.33	N/A
Total for all systems	\$1,402,071.80	\$1,309,232.80	N/A	\$128,216.33	N/A

Components

Actual Information	
Description	File Name

Sweep existing transmission line	<div> <div> Component Description: </div> <div> Cost to sweep existing transmission line to prepare for re-channeling and new antenna installation. Supporting documentation and explanation of variance attached. This invoice has been paid. </div> </div> <div> Amount: </div> <div> <div> Component Description: </div> <div> Full cost to sweep existing transmission line to prepare for re-channeling and new antenna installation. Supporting documentation attached. </div> </div> <div> Amount: </div>
Flexible Air Transmission Line - dielectric, 3"	Information not provided.

Cost
Information

Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower TOWER	\$779,800.00	\$747,000.00		\$61,395.71	
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$25,000.00	N/A	\$0.00	N/A
Major tower reinforcement /modifications	\$421,000.00	\$400,000.00	N/A	\$0.00	N/A
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	\$56,945.71	N/A
Structural Study	<i>\$12,000.00</i>	\$12,000.00	N/A	\$4,450.00	N/A
Interim antenna installation	<i>\$110,000.00</i>	\$110,000.00	N/A	\$0.00	N/A
Sub-total	\$779,800.00	\$747,000.00	N/A	\$61,395.71	N/A
Total for all systems	\$1,402,071.80	\$1,309,232.80	N/A	\$128,216.33	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.								
Major tower reinforcement /modifications	Information not provided.								
Tall Tower (greater than 500')	<table> <tr> <td>Component Description:</td><td>Cost to mobile crew to site, climb tower, inspect existing transmission line for damage and leaks, and attempt to repair any leaks founds. Supporting documentation attached. This invoice has been paid.</td></tr> <tr> <td>Amount:</td><td>\$9,060.00</td></tr> <tr> <td>Component Description:</td><td>Cost for tower crew to mobilize and rig tower at 850ft level of tower. Per Quote - Line Item 2. Supporting documentation attached. This invoice has been paid.</td></tr> <tr> <td>Amount:</td><td>\$47,885.71</td></tr> </table>	Component Description:	Cost to mobile crew to site, climb tower, inspect existing transmission line for damage and leaks, and attempt to repair any leaks founds. Supporting documentation attached. This invoice has been paid.	Amount:	\$9,060.00	Component Description:	Cost for tower crew to mobilize and rig tower at 850ft level of tower. Per Quote - Line Item 2. Supporting documentation attached. This invoice has been paid.	Amount:	\$47,885.71
Component Description:	Cost to mobile crew to site, climb tower, inspect existing transmission line for damage and leaks, and attempt to repair any leaks founds. Supporting documentation attached. This invoice has been paid.								
Amount:	\$9,060.00								
Component Description:	Cost for tower crew to mobilize and rig tower at 850ft level of tower. Per Quote - Line Item 2. Supporting documentation attached. This invoice has been paid.								
Amount:	\$47,885.71								

Structural Study	<div> <div> Component Description: </div> <div> Full cost of tower structural study. Supporting documentation attached. This invoice has been paid. </div> </div> <div> Amount: </div> <div> \$4,450.00 </div>
Interim antenna installation	Information not provided.

Cost Information

Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$161,210.00	\$152,750.00		\$7,055.49	
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$2,000.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	\$10,520.00	\$10,000.00	N/A	N/A	N/A
NEPA Section 106 environmental review, if needed	\$6,310.00	\$6,000.00	N/A	N/A	N/A

Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	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	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$4,742.99	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A

Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$312.50	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$2,000.00	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Sub-total	\$161,210.00	\$152,750.00	N/A	\$7,055.49	N/A
Total for all systems	\$1,402,071.80	\$1,309,232.80	N/A	\$128,216.33	N/A

Components

Actual Information	
Description	File Name
RF Exposure Measurements	Information not provided.
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.

ASR modification (prepare FCC Form 854)	Information not provided.
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	Information not provided.
NEPA Section 106 environmental review, if needed	Information not provided.
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees - Negotiation of lease and other matters for shared locations	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.

<p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="710 168 1013 212">Component Description:</td><td data-bbox="1149 168 1380 728"> <p>Invoice for station's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff and has provided corrected supporting documentation.</p> </td></tr> <tr> <td data-bbox="710 728 821 772">Amount:</td><td data-bbox="1149 728 1268 772">\$4,837.97</td></tr> <tr> <td data-bbox="710 873 1013 918">Component Description:</td><td data-bbox="1149 873 1380 1377"> <p>Invoice for WTPX's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff. Hourly supporting documentation and invoice attached.</p> </td></tr> <tr> <td data-bbox="710 1377 821 1422">Amount:</td><td data-bbox="1149 1377 1268 1422">\$4,742.99</td></tr> </table>	Component Description:	<p>Invoice for station's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff and has provided corrected supporting documentation.</p>	Amount:	\$4,837.97	Component Description:	<p>Invoice for WTPX's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff. Hourly supporting documentation and invoice attached.</p>	Amount:	\$4,742.99
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Amount:	\$4,742.99								
<p>Prepare request for Special Temporary Authorization</p>	<p>Information not provided.</p>								
<p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>								
<p>Prepare and or review reimbursement form</p>	<p>Information not provided.</p>								
<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<p>Information not provided.</p>								

<p>Perform engineering study for new channel assignment and antenna development</p>	<table> <tr> <td data-bbox="703 100 1109 728"> <p>Component Description:</p> </td><td data-bbox="1109 100 1428 728"> <p>Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.</p> </td></tr> <tr> <td data-bbox="703 728 1109 795"> <p>Amount:</p> </td><td data-bbox="1109 728 1428 795"> <p>\$62.50</p> </td></tr> <tr> <td data-bbox="703 795 1109 1283"> <p>Component Description:</p> </td><td data-bbox="1109 795 1428 1283"> <p>Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.</p> </td></tr> <tr> <td data-bbox="703 1283 1109 1350"> <p>Amount:</p> </td><td data-bbox="1109 1283 1428 1350"> <p>\$250.00</p> </td></tr> </table>	<p>Component Description:</p>	<p>Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.</p>	<p>Amount:</p>	<p>\$62.50</p>	<p>Component Description:</p>	<p>Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.</p>	<p>Amount:</p>	<p>\$250.00</p>
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<p>Amount:</p>	<p>\$250.00</p>								
<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="703 1283 1109 1798"> <p>Component Description:</p> </td><td data-bbox="1109 1283 1428 1798"> <p>Cost of RF consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid.</p> </td></tr> <tr> <td data-bbox="703 1798 1109 1892"> <p>Amount:</p> </td><td data-bbox="1109 1798 1428 1892"> <p>\$2,000.00</p> </td></tr> </table>	<p>Component Description:</p>	<p>Cost of RF consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid.</p>	<p>Amount:</p>	<p>\$2,000.00</p>				
<p>Component Description:</p>	<p>Cost of RF consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid.</p>								
<p>Amount:</p>	<p>\$2,000.00</p>								
<p>Comprehensive coverage verification via field study, if needed</p>	<p>Information not provided.</p>								

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	\$87,580.00	\$78,015.00		\$4,375.00	
MVPD Notification of Channel Change	<i>\$500.00</i>	\$500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$0.00</i>	\$0.00	The amount is yet to be determined (TBD) and ION will submit on-air announcement costs when finalized.	N/A	N/A
Equipment Storage	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$10,000.00</i>	\$10,000.00	N/A	\$4,375.00	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A
Local Zoning	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A

FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$2,000.00	N/A	N/A	N/A
Sub-total	\$87,580.00	\$78,015.00	N/A	\$4,375.00	N/A
Total for all systems	\$1,402,071.80	\$1,309,232.80	N/A	\$128,216.33	N/A

Components

Actual Information	
Description	File Name
MVPD Notification of Channel Change	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.
Equipment Storage	Information not provided.

Equipment Delivery and Handling Charges	<div data-bbox="710 174 1372 607"> <p>Component Description: Cost of freight, shipping, and handling for primary antenna. Cover letter and supporting documentation are attached. This invoice has been paid.</p> <p>Amount: \$4,375.00</p> </div> <div data-bbox="710 712 1372 1227"> <p>Component Description: Full cost of Freight, Shipping & Handling related to Dielectric equipment order. Detailed cost breakdown and supporting documentation attached. This invoice has been paid.</p> <p>Amount: \$4,375.00</p> </div>
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.
Non-zoning permits	Information not provided.
Local Zoning	Information not provided.
FCC Filing Fees - Special Temporary Authorization request	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	Information not provided.
DTV Medical Facility Notification	Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$1,402,071.80	\$1,309,232.80
			\$128,216.33

Reimbursement Status	Question	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

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

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

<p>8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p>Mario Vasquez <i>Vice President - Finance, Operations</i></p> <p>03/11/2020</p>

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

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

<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p>Mario Vasquez <i>Vice President - Finance, Operations</i></p> <p>03/11/2020</p>

Certification	Section	Question	Response
	Submission of Final Allocation or Accounting Information Statements	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>	
		<ol style="list-style-type: none"> 1. The Authorized Person signing below certifies 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 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 above-named applicant for the Authorization(s) specified above.

Mario Vasquez
Vice President - Finance, Operations

03/11/2020

Attachments