

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

68058 Service: DTV Channel: 22 (UHF) Facility Call WHSG-TV Sign:

04/01

ID:

File 0000028012

Number:

FRN: 0004346060 Date

> Submitted: /2020

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
TRINITY BROADCASTING OF TEXAS, INC. Doing Business As: TRINITY BROADCASTING NETWORK	13600 Heritage Parkway Fort Worth, TX 76177 United States	+1 (855) 826- 2255	CMMAY@MAYLAWOFFICES. COM	Not-for- Profit

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Information

Preparer Contact Name and Information

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

Broadcaster Information and **Transition** Plan

Question Response

Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	Yes
Briefly describe transition plan	Reduce TPO to 50% and remove 1/2 of the xmitter system. Install new SS xmitter system. Add AUX antenna & line to the tower & feed it with a reduced signal from

the current xmitter. Remove & replace

antenna. Test.

Transmitters Section Question Response Transmitter Related Expenses Do you have transmitter related expenses? Yes

Primary Transmitter

Existing Transmitter Information

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter	Manufacturer	
Manufacturer and Type	Model	DCX 2
	Year	2004
	Туре	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	50 kW

Primary Transmitter

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	HPTV PRLX U24
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	40 kW
	Justification for New Transmitter	See Atachment

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	Yes
	Size	2 inches
	Length	500.0 feet
	Other Electrical Service	Yes
	Description	Labor, Disconnects, breakers

HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Туре	Heating and Cooling
	Size	10 tons
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	Yes
	Size	1000.0 square feet
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
install	xmitter installation

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	Leased
	Owner	American Tower
	Site	N/A
	Is the existing antenna shared with another station or stations?	Yes
	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	Class	Full Power
Manufacturer and Type	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	Туре	Broadband Panel
	Number of Stations Supported	4
	Number of Panels	14
	Design power capacity in use	80.0 %
	Lower Limit	470.00 MHz
	Upper Limit	800.00 MHz
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	1000.0 kW

Manufacturer	
Model	TUD-05-14 /70U-2-B
Year	2000

Facility ID's and Call Signs of all stations with whom the antenna is shared.

Facility ID	Call Sign
48813	WUVG-DT
64033	WPCH-TV
72120	WGCL-TV

Primary Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Ownership	Leased
	Owner	aMERICAN tOWER
	Is antenna shared?	Yes
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna	Class	Full Power
Manufacturer and Types	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Туре	Broadband Panel
	Number of Stations Supported	4
	Number of Panels/Bays	12
	Lower Limit	470.00 MHz
	Upper Limit	800.00 MHz
	Design power capacity in use	80.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	1000.0 kW
	Manufacturer	

Model	PEPL48D- C170-2-6
Year	2017
Justification for New Antenna	aMERICAN tOWER

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	Yes
	Туре	Additional Module
	Number of channels supported	1
	Frequencies of channels supported	RF channel
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	No
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Broadband
	Feed Line Size	8 3/16 inches inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes

Enter a list of RF channel numbers.

RF	Chan	nel N	lum	her

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Primary Antenna

Other Antenna Cost Not Listed

Information not provided.

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

Existing Transmission Line

Primary

Transmission Line

n Line Section	Question	Response
Existing Transmission Line Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Owner	American Tower
	Site	N/A
	Is the existing transmission line shared with another station or stations?	Yes
	Is Transmission Line in operating condition?	Yes
Existing Transmission	Manufacturer	
Line Manufacturer and Type	Туре	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	2000 feet per run

Facility ID's and Call Signs of all stations with whom the transmission line is shared.

Facility ID	Call Sign
64033	WPCH-TV
48813	WUVG-DT

Primary Transmission

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
	Туре	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	2000 feet per run
	Justification for New Transmission Line	American tower

Other Transmission Line Expenses Not Listed

Primary	C
Transmission	Դ _լ

or	Name	Description
	combiner install	installation

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

	1	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?	Candelabra
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	Unknown
Existing Tower	Do you have a tower registration number?	Yes
Structure Registration	ASR Number	1223132
Coordinates (NAD83 (Latitude (NAD83)	33° 48' 26.4" N-
North American Datum of 1983))	Longitude (NAD83)	084° 20' 21.5" W-
	Overall Structure Height	1182.07 feet
	Support Structure Height	1056.09 feet
	Ground Elevation Above Mean Sea Level (AMSL)	867.12 feet

Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	American Tower, LLC
Date Constructed	03/27/2002

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

Facility ID	Call Sign	Service
64033	WPCH-TV	DTV
6900	WUPA	DTV
22819	WATL	DTV
48813	WUVG-DT	DTV
72120	WGCL-TV	DTV

Primary Tower

Tower Modification Costs

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

Primary Tower

Tower Rigging Costs

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

Primary Tower

Other Tower Expenses Not Listed

Name	Description
drawing	permit
ground	package
structural	load study

Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	95
	Explanation	American Tower
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	Yes
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	No
	Prepare request for Special Temporary Authority	Yes
	Quantity	2
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting	Prepare and file Form FCC Construction Permit Application	Yes
Services	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes

	Prepare request for Special Temporary Authority	Yes
	Quantity	2
	NEPA Section 106 environmental review	No
	Environmental Assessment	Yes
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Professional

Other Professional Services Expenses Not Listed

I Services Costs	Description
site	meeting
RF System	testing

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	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	No
	FCC Special Temporary Authority Application	No
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	No
	Does this relocation require MVPD Notification of a Channel Change?	No

Other Expenses

Other Expenses Not Listed

Name	Description	
ATC Tower rental	One time tower rental during repack	

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 HPTV PRLX U24	\$1,673,500.00	\$1,590,750.00		\$1,105,054.27	
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,400,000.00	N/A	\$987,439.27	N/A
install	\$35,000.00	\$35,000.00	installation quote	\$35,000.00	N/A
Other Building Addition Size: 1000.0	\$30,000.00	\$30,000.00	American Tower	\$7,500.00	N/A
10 Ton system	\$60,500.00	\$57,500.00	N/A	\$14,375.00	N/A
Other Electrical Service: Labor, Disconnects, breakers	\$62,000.00	\$62,000.00	updated quote	\$59,177.50	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$13,000.00	\$6,250.00	N/A	\$1,562.50	N/A
Sub-total	\$1,673,500.00	\$1,590,750.00	N/A	\$1,105,054.27	N/A
Total for all systems	\$4,481,845.00	\$2,221,022.00	N/A	\$1,245,931.52	N/A

Components

Actual Information Description	File Name	
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	Component Description: Amount:	30% 7 days prions to shipping \$296,231.78
	Component Description: Amount:	5% proof \$49,371.96
	Component Description: Amount:	30% 60 days \$296,231.78
	Component Description: Amount:	35% deposit \$345,603.75
install	Component Description: Amount:	xmitter installat \$35,000.00
Other Building Addition Size: 1000.0	Component Description: Amount:	25% deposit, se attached Cap C \$7,500.00
	Component Description: Amount:	25% deposit, se attached Cap C \$7,500.00
10 Ton system	Component Description: Amount:	25% deposit, se attached Cap C \$14,375.00
	Component Description:	25% deposit, se

Other Electrical Service: Labor, Disconnects, **Component Description:** xmitter electrical breakers... \$58,240.00 Amount: **Component Description:** 25% deposit, see attached Cap Con Amount: \$937.50 **Component Description:** 25% deposit, see attached Cap Con **Amount:** \$937.50 2" Rigid Conduit and Wiring (Cost per foot) **Component Description:** 25% deposit, see attached CAP CON Amount: \$1,562.50 **Component Description:** 25% deposit, see attached Cap Con **Amount:** \$1,562.50

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
Primary Antenna PEPL48D- C170-2-6	\$1,199,880.00	\$186,993.00		\$45,773.13	
Elbow complex, broadband, at antenna input, per 8 3/16. feedline (if needed)	\$18,950.00	\$5,400.00	N/A	\$1,350.00	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$625.00	N/A
UHF - High Power Top Mount (200-1000 kW), Four Station broadband panel antenna, elliptically or circularly polarized	\$1,090,000.00	\$122,693.00	N/A	\$30,673.13	N/A
Adding a module to existing combiner (without antenna)	\$84,200.00	\$52,500.00	N/A	\$13,125.00	N/A
Sub-total	\$1,199,880.00	\$186,993.00	N/A	\$45,773.13	N/A

Total for	\$4,481,845.00	\$2,221,022.00	N/A	\$1,245,931.52	N/A
all systems					

Components

Actual Information Description	File Name	
Elbow complex, broadband, at antenna input, per 8 3/16. feedline (if needed)	Component Description: Amount:	25% deposit, see attached Cap Con \$1,350.00
	Component Description: Amount:	25% deposit, see attached Cap Con \$1,350.00
Sweep test of existing antenna	Component Description: Amount:	25% deposit, see attached Cap Con \$625.00
	Component Description: Amount:	25% deposit, see attached Cap Con \$625.00
UHF - High Power Top Mount (200-1000 kW), Four Station broadband panel antenna, elliptically or circularly polarized	Component Description: Amount:	25% deposit, see attached Cap Con \$30,673.13
	Component Description: Amount:	25% deposit, see attached Cap Con \$30,673.13

Adding a r	nodule to existing
combiner ((without antenna)

Component Description: 25% deposit, see

attached Cap Con

Amount: \$13,125.00

Component Description: 25% deposit, see

attached Cap Con

Amount: \$13,125.00

Cost Information

Transmission Line

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

Description Primary Transmission Line	Predetermined Cost Estimate \$805,500.00	Estimated Cost \$115,116.00	Estimated Cost Justification	Actual Cost \$28,779.12	Actual Cost Justification
combiner install	\$7,500.00	\$7,500.00	N/A	\$1,875.00	N/A
Rigid Transmission Line - copper, 8 3 /16" broadband	\$798,000.00	\$107,616.00	N/A	\$26,904.12	N/A
Sub-total	\$805,500.00	\$115,116.00	N/A	\$28,779.12	N/A
Total for all systems	\$4,481,845.00	\$2,221,022.00	N/A	\$1,245,931.52	N/A

Components

Actual Information		
Description	File Name	
combiner install		
	Component Description:	25% deposit, see
		attached Cap Con
	Amount:	\$1,875.00
	Component Description:	25% deposit, see
		attached Cap Con
	Amount:	\$1,875.00

Rigid Transmission Line -
copper, 8 3/16" broadband

Component Description: 25% deposit, see

attached Cap Con

Amount: \$26,904.12

Component Description: 25% deposit, see

attached Cap Con

Amount: \$26,904.13

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
Primary Tower GTOWER	\$618,610.00	\$158,270.00		\$39,567.50	
drawing	\$4,700.00	\$4,700.00	Tower permit drawing package, American Tower	\$1,175.00	N/A
ground	\$4,700.00	\$4,700.00	American Tower	\$1,175.00	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$4,960.00	N/A	\$1,240.00	N/A
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$105,000.00	N/A	\$26,250.00	N/A
structural	\$3,910.00	\$3,910.00	American Tower	\$977.50	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$35,000.00	N/A	\$8,750.00	N/A

Sub-total	\$618,610.00	\$158,270.00	N/A	\$39,567.50	N/A
Total for all systems	\$4,481,845.00	\$2,221,022.00	N/A	\$1,245,931.52	N/A

Components

Actual Information Description	File Name	
drawing	Component Description: Amount:	25% deposit, see attached Cap Con \$1,175.00
	Component Description: Amount:	25% deposit, see attached Cap Con \$1,175.00
ground	Component Description: Amount:	25% deposit, see attached Cap Con \$1,175.00
	Component Description: Amount:	25% deposit, see attached Cap Con \$1,175.00
Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study	Component Description: Amount:	25% deposit, see attached Cap Con \$1,240.00
	Component Description: Amount:	25% deposit, see attached Cap Con \$1,240.00

Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	Component Description: Amount:	25% deposit, see attached Cap Con \$26,250.00
	Component Description: Amount:	25% deposit, see attached Cap Con \$26,250.00
structural		
	Component Description:	25% deposit, see
	Amount:	attached Cap Con \$977.50
	7 meann	40.1100
	Component Description:	25% deposit, see
		attached Cap Con
	Amount:	\$977.50
Minor tower reinforcement		
/modifications	Component Description:	25% deposit, see
	Amount	attached Cap Con
	Amount:	\$8,750.00
	Component Description:	25% deposit, see
		attached Cap Con
	Amount:	\$8,750.00

Cost Information

Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$75,285.00	\$66,180.00		\$9,045.00	
RF System	\$5,000.00	\$5,000.00	Quoted by ATC	\$1,250.00	N/A
site	\$2,000.00	\$2,000.00	American Tower	\$500.00	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
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,200.00	N/A	N/A	N/A

Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$4,000.00	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	N/A	N/A
Prepare request for Special Temporary Authorization	\$4,100.00	\$3,000.00	N/A	N/A	N/A
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	\$2,105.00	\$2,000.00	N/A	N/A	N/A

Total for all systems	\$4,481,845.00	\$2,221,022.00	N/A	\$1,245,931.52	N/A
Sub-total	\$75,285.00	\$66,180.00	N/A	\$9,045.00	N/A
Project management of the transition	\$15,010.00	\$9,480.00	N/A	\$2,370.00	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	\$625.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$2,550.00	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$1,750.00	N/A

Components

Actual Information		
Description	File Name	

RF System	Component Description: Amount:	25% deposit, see attached Cap Con \$1,250.00
	Component Description: Amount:	25% deposit, see attached Cap Con \$1,250.00
site	Component Description: Amount:	25% deposit, see attached Cap Con \$500.00
	Component Description: Amount:	25% deposit, see attached Cap Con \$500.00
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	Information not provided.	
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	Information not provided.	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Prepare request for Special Temporary Authorization	Information not provided.	

RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	Information not provided.	
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	Engineering for 2100 CP \$1,750.00
Perform engineering study for new channel assignment and antenna development	Component Description: Amount:	25% deposit, see attached Cap Con \$1,250.00
	Component Description: Amount:	Interference study for CP \$650.00
	Component Description: Amount:	25% deposit, see attached Cap Con \$1,250.00
	Component Description:	Further interference study for CP
	Amount:	\$650.00

Address transition timing and coordination issues w/	Component Description:	25% deposit, see
other stations and wireless		attached Cap Con
	Amount:	\$625.00
	Component Description:	25% deposit, see
		attached Cap Con
	Amount:	\$625.00
Prepare and or review reimbursement form	Information not provided.	
Project management of the transition		
transition	Component Description:	25% deposit, see attached Cap Con
	Amount:	\$2,370.00
	Component Description:	25% deposit, see
		attached Cap Con
	Amount:	\$2,370.00

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	\$109,070.00	\$103,713.00		\$17,712.50	
ATC Tower rental	\$57,600.00	\$57,600.00	American Tower rental	\$14,400.00	N/A
Equipment Delivery and Handling Charges	\$12,500.00	\$12,500.00	American Tower	\$3,125.00	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$26,670.00	\$26,670.00	It is required by ATC that the old suite be empty of all transmitter equipment.	N/A	N/A
Non- zoning permits	\$750.00	\$750.00	American Tower	\$187.50	N/A
DTV Medical Facility Notification	\$11,550.00	\$6,193.00	N/A	N/A	N/A
Sub-total	\$109,070.00	\$103,713.00	N/A	\$17,712.50	N/A
Total for all systems	\$4,481,845.00	\$2,221,022.00	N/A	\$1,245,931.52	N/A

Components

Actual Information	
Description	File Name

ATC Tower rental		
	Component Description:	25% deposit, see
		attached Cap Con
	Amount:	\$14,400.00
Equipment Delivery and		
Handling Charges	Component Description:	25% deposit, see
		attached Cap Con
	Amount:	\$3,125.00
	Component Description:	25% deposit, see
		attached Cap Con
	Amount:	\$3,125.00
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.	
Non-zoning permits		
	Component Description:	25% deposit, see
		attached Cap Con
	Amount:	\$187.50
	Component Description:	25% deposit, see
		attached Cap Con
	Amount:	\$187.50
DTV Medical Facility Notification	Information not provided.	

Cost Information

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$4,481,845.00	\$2,221,022.00	\$1,245,931.52

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

Section Question Response

Submission of Estimated Expenses Statements

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.

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

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

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

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

04/01/2020

Section Question Response

Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).

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

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

- 8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.

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

04/01/2020

Section Question Response

Submission of Final Allocation or Accounting Information Statements

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.

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

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

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

04/01/2020

Attachments