## FCC Form 399:

Reimbursement Request

| Facility 70423 | Service: DCA | Call | WUBX-CD | Channel: 24 (UHF) |
| :---: | :---: | :---: | :---: | :---: |
| ID: |  | Sign: |  |  |
| File 000002 | 7573 |  |  |  |
| Number: |  |  |  |  |
| FRN: 0014037857 | Date | 04/08 |  |  |
|  | Submitted: | /2020 |  |  |


| Applicant Information | Applicant Name, Type, and Contact Information |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | Applicant | Address | Phone | Email | Applicant <br> Type |
|  | L4 MEDIA GROUP, LLC | PO Box | +1 (612) | ssaldana@sktytrading. | Limited |
|  | Doing Business As: L4 | 60606 | 202-4980 | com | Liability |
|  | MEDIA GROUP, LLC | Suite |  |  | Company |
|  |  | 2450 |  |  |  |
|  |  | Chicago, |  |  |  |
|  |  | IL 60606 |  |  |  |
|  |  | United |  |  |  |
|  |  | States |  |  |  |

## Reimbursement Roursement Contact Name and Information

Applicant Address Phone Email
[Confidential]

## Preparer Contact Name and Information

|  | Address | Phone | Email |
| :--- | :--- | :--- | :--- |
| Joseph L. Snelson , | 1282 Smallwood Drive, | $+1(303)$ 344- | joe. |
| Jr . | Suite 372 | 8037 | snelson@mswdtv. |
| Technical Consultant | Waldorf, MD 20603 |  | com |
| Meintel, Sgrignoli \& | United States |  |  |
| Wallace |  |  |  |


| Broadcaster <br> Information | Question | Response |
| :--- | :--- | :--- |
| and <br> and the station be sharing equipment with | No |  |
| Transition <br> Plan | 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. |  |
|  | 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 <br> Description | Type of change | Retune <br> Existing |
|  | Use | Primary <br> (Main) |
|  | Ownership | Owned |
|  | Owner | N/A |
|  | Is this transmitter currently shared with <br> another station? | No |
|  | Is this transmitter currently in operating |  |
| condition? |  |  |
| Manufacturer | Yes |  |
| Existing Transmitter <br> Manufacturer and Type | Model | Elettronika |


| Year | 2015 |
| :--- | :--- |
| Type | Solid State |
| Solid State Cooling | Air Cooled |
| Solid State Power capacity | 2.0 kW |


| Primary <br> Transmitter | Retuning Transmitter Costs |  |  |
| :--- | :--- | :--- | :--- | :--- |
|  | Section | Question | Response |
|  | New IOT Tubes | Number of Tubes (including accessories) <br> needed | $\mathrm{N} / \mathrm{A}$ |
|  | New Mask Filter | Power | 3 kW |
|  | Other Power | $\mathrm{N} / \mathrm{A}$ |  |
|  | New Exciter | Is a new exciter needed? | No |

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 |  |
| Does the replacement transmitter require | No |  |
|  | HVAC Service? | N/A |


|  | Size | $\mathrm{N} / \mathrm{A}$ |
| :--- | :--- | :--- |
|  | Other Size | $\mathrm{N} / \mathrm{A}$ |
| Transmitter Building <br> Addition/Modification or <br> Leasehold Improvement | Does the Transmitter Building require an <br> addition, modification, other leashold <br> improvement? | No |
|  | Size | $\mathrm{N} / \mathrm{A}$ |
| Channel 14 Costs | Is an RF Consulting Engineer needed? | $\mathrm{N} / \mathrm{A}$ |
|  | Is a channel 14 Mask Filer needed? | $\mathrm{N} / \mathrm{A}$ |
|  | Is additional field engineering time needed? | $\mathrm{N} / \mathrm{A}$ |
|  | Number of Days | $\mathrm{N} / \mathrm{A}$ |

Primary
Other Transmitter Cost Not Listed
Transmitter Information not provided.

## Antennas

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

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? | Yes |
|  | 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 | Class A |
|  | Mounting | Side Mount |
|  | Antenna position in stack | Not in Stack |
|  | Polarization | Horizontal |
|  | Type | Other |
|  | 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 | UHF-TV <br> LOG- <br> PERIODIC <br> ANTENNA |


| ERP: (Effective Radiated Power) | 6.5 kW |
| :--- | :--- |
| Manufacturer |  |
| Model | CL-1469B |
| Year | 2015 |


| 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? | No |
|  | Ownership | Owned |
|  | Owner | N/A |
|  | Is antenna shared? | No |
|  | Is antenna directional? | Yes |
|  | Will antenna be located on or in close proximity to an antenna farm? | No |
| New Antenna <br> Manufacturer and Types | Class | Class A |
|  | Mounting | Side Mount |
|  | Antenna position in stack | Not in Stack |
|  | Polarization | Horizontal |
|  | Type | Broadband Panel |
|  | Number of Stations Supported | 1 |
|  | Number of Panels/Bays | 1 |
|  | Lower Limit | 470.00 MHz |
|  | Upper Limit | 860.00 MHz |
|  | Design power capacity in use | 100.0 \% |
|  | Other Antenna Type | N/A |
|  | ERP: (Effective Radiated Power) | 5.52 kW |
|  | Manufacturer |  |


| Model | TUA-C1-01 <br> /01M-T |
| :--- | :--- |
| Year | 2017 |
| Justification for New Antenna | Applicant is <br> proposing <br> to replace <br> the current <br> antenna <br> with one <br> that has a <br> similar <br> pattern and <br> will work on <br> the repack <br> channel. |

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? | No |
|  | Broadband or Single Channel? | N/A |
|  | Feed Line Size | N/A |
| Side Mount Brackets | Do you require the separate purchase of side mount brackets for a high power antenna? | 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 <br> transmission line and antenna? | Yes |
| :--- | :--- | :--- |

Primary Other Antenna Cost Not Listed

Antenna Information not provided.

| TransmissionSeftien | Question | Response |
| :--- | :--- | :--- |
| Transmission Line <br> Related Expenses | Do you have transmission line related <br> expenses? | No |

Tower
Equipment And Rigging

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

Primary Tower

Existing Tower

| Section | Question | Response |
| :---: | :---: | :---: |
| Existing Tower Description | Type of change | Modify Existing |
|  | Tower Use | Primary (Main) |
|  | Description of Use | N/A |
|  | Ownership | Leased |
|  | Is this tower consider Complex? | No |
|  | Is this tower currently shared with any other stations? | Yes |
|  | One or more FM, AM or TV radio broadcaster(s) | No |
|  | Others Types of Users | Yes |
|  | Is tower documented for structural analysis? | Unknown |
|  | Is tower compliant with Rev G? | Unknown |
| Existing Tower Structure Registration | Do you have a tower registration number? | Yes |
|  | ASR Number | 1007971 |
| Coordinates (NAD83 ( North American Datum of 1983)) | Latitude (NAD83) | $\begin{aligned} & 36^{\circ} 03^{\prime} \\ & 55.1^{\prime \prime} \mathrm{N}- \end{aligned}$ |
|  | Longitude (NAD83) | $\begin{aligned} & 078^{\circ} 53^{\prime} \\ & 24.0^{\prime \prime} \mathrm{W}- \end{aligned}$ |


| Overall Structure Height | 320.86 feet |
| :--- | :--- |
| Support Structure Height | 299.87 feet |
| Ground Elevation Above Mean Sea Level <br> (AMSL) | 391.07 feet |
| Structure Type | TOWER - <br> Free <br> Standing or <br> Guyed <br> Structure |
| Tower Owner | Pinnacle <br> Towers LLC |
| Date Constructed | 03/01/1985 |

## Other Types of Users

Users

Cellular

## Tower Modification Costs

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

Primary
Tower
Tower Rigging Costs

| Section | Question | Response |
| :--- | :--- | :--- |
| Tower Rigging Costs | Complex Tower | N/A |

## Helicopter Services

| Outside | Section | Question | Response |
| :---: | :---: | :---: | :---: |
| Professional Services Costs Outside Project Management Services |  | Do you require outside project management services? | Yes |
|  |  | Number of Hours | 200 |
|  |  | Explanation | Applicant has no internal resources capable of overseeing, identifying, purchasing, installing and commissioning this repack project. It will rely solely on outside services to manage all work required. |
|  | Outside RF consulting Engineering Services | Perform engineering study for new channel assignment and antenna development | Yes |
|  |  | Prepare engineering section of Form FCC Construction Permit Application | Yes |
|  |  | For Auxiliary Facility | No |
|  |  | For Main Facility | Yes |
|  |  | Prepare engineering section of Form FCC License to Cover Application | Yes |
|  |  | For Auxiliary Facility | No |
|  |  | For Main Facility | Yes |
|  |  | Prepare request for Special Temporary Authority | No |
|  |  | Quantity | N/A |
|  |  | Do you have Distributed Transmission System engineering services? | N/A |
|  |  | Critical Facility | N/A |


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


| Other Professional Services Expenses Not Listed |  |
| :---: | :---: |
| Professional \$eprye ces Costs | Description |
| Progress Reporting | Prepare and file 10 required progress reports on FCC Form 2100, Schedule 387 on a quarterly basis with the FCC. |

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 | 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? | 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? | No |

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 <br> Cost | Estimated <br> Cost <br> Justification | Actual Cost | Actual Cost Justification |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Primary <br> Transmitter <br> TXUD2000 | \$109,355.00 | \$19,340.00 |  | \$4,340.00 |  |
| 3 kW mask filter | \$4,155.00 | \$4,340.00 | THE <br> INITIAL ESTIMATE WAS OUTDATED | \$4,340.00 | THE <br> INITIAL ESTIMATE WAS OUT DATED |
| UHF and VHF - minor banding issues | \$105,200.00 | \$15,000.00 | N/A | \$0.00 | N/A |
| Sub-total | \$109,355.00 | \$19,340.00 | N/A | \$4,340.00 | N/A |
| Total for all systems | \$597,180.00 | \$413,440.75 | N/A | \$54,105.75 | N/A |

## Components

| Actual Information <br> Description | File Name |  |
| :--- | :--- | :--- |
| 3 kW mask filter | Component Description: | DELTA DTV <br> FILTER Part \# <br> $1604-8-2 N ~ U H F ~$ |
|  |  | 8 cavities, Power <br> 2.7 KW RMS full |
|  |  | service mask <br> filter <br> $\$ 4,340.00$ |
|  | 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 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Primary <br> Antenna TUA- C1-01/01M-T | \$34,290.00 | \$30,700.00 |  | \$0.00 |  |
| Sweep test of existing antenna | \$6,730.00 | \$4,500.00 | N/A | N/A | N/A |
| UHF - Lower <br> Power Side <br> Mount, Class <br> A One <br> Station <br> antenna -- <br> basic | \$26,300.00 | \$25,000.00 | N/A | N/A | N/A |
| UHF - Lower Power Side Mount, Class A broadband panel (cost per panel) | \$1,260.00 | \$1,200.00 | N/A | N/A | N/A |
| Sub-total | \$34,290.00 | \$30,700.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$597,180.00 | \$413,440.75 | N/A | \$54,105.75 | N/A |

## Components

Information not provided.

Cost Transmission Line

Information 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 <br> Cost <br> Justification | Actual Cost | Actual Cost Justification |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Primary Tower TOWER | \$268,500.00 | \$238,000.00 |  | \$5,700.00 |  |
| Minor tower reinforcement /modifications | \$158,000.00 | \$150,000.00 | N/A | N/A | N/A |
| Short Tower (less than 500') | \$84,200.00 | \$63,000.00 | N/A | N/A | N/A |
| 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 | \$5,700.00 | N/A |
| Sub-total | \$268,500.00 | \$238,000.00 | N/A | \$5,700.00 | N/A |
| Total for all systems | \$597,180.00 | \$413,440.75 | N/A | \$54,105.75 | N/A |

## Components

## Actual Information

Description
File Name
Minor tower reinforcement Information not provided.

Short Tower (less than 500')

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

Information not provided.

| Component Description: | PERMIT |
| :---: | :---: |
|  | APPLICATION AND |
|  | CONSTRUCTION |
|  | DOCS |
| Amount: | \$5,700.00 |
| Component Description: | ATC application fee |
| Amount:Component Description: | \$4,920.00 |
|  | Structural |
|  | engineering, |
|  | prorated portion |
| Amount: | \$1,500.00 |

## Outside Professional Services

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

|  |  |  | Estimated |
| :--- | :---: | :--- | :--- | :--- | :--- | :--- |
| Predetermined |  |  |  |
| Cost Estimate |  |  |  |$\quad$| Estimated |
| :--- | :--- | :--- | :--- | :--- |
| Cost |$\quad$| Cost |
| :--- |
| Justification | | Actual |
| :--- |
| Cost |$\quad$| Actual Cost |
| :--- |
| Justification |


| $\begin{array}{l}\text { Comprehensive } \\ \text { coverage } \\ \text { verification via } \\ \text { field study, if } \\ \text { needed }\end{array}$ | $\$ 84,200.00$ | $\$ 30,000.00$ | $\begin{array}{c}\text { See } \\ \text { attached } \\ \text { QUOTE }\end{array}$ |  |
| :--- | :--- | :--- | :--- | :--- | :--- |
| 598, WUBX |  |  |  |  |
| L4, 030120 |  |  |  |  |
| REPACK |  |  |  |  |
| FIELD |  |  |  |  |$]$


| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,180.00 | ACTUAL SERVICES EXCEEDED ESTIMATE | \$3,180.00 | The original estimate was based on the FCC menu, and missed the actual labor required to complete the task by \$180 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$9,473.75 | Due to tower loading and congestion concerns we had to consider alternative antennas and mounting heights which necessitated additional studies. | \$9,473.75 | Conduct Study for <br> Alternative <br> Antenna, also, due to tower congestion and loading concerns Conduct Study, <br> Prepare and File FCC CP <br> Modification of Construction Permit form 2100 for change in antenna height on tower for WUBX-CD |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | N/A | N/A |
| Project management of the transition | \$31,600.00 | \$30,000.00 | N/A | \$21,000.00 | N/A |


| Progress <br> Reporting | $\$ 20,000.00$ | $\$ 20,000.00$ | Prepare and <br> file 10 <br> required <br> progress <br> reports on <br> FCC Form <br> 2100, | $\$ 1,192.50$ | N/A |
| :--- | :--- | :--- | :--- | :--- | :--- |

## Components

## Actual Information <br> Description

Comprehensive coverage verification via field study, if needed

Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application

## File Name

Information not provided.

Information not provided.

| Component Description: | WUBX-CD Durham, |
| :--- | :--- |
|  | NC Prepare initial |
| budgets, equipment |  |
| list, and determine |  |
| equipment |  |
| replacements for |  |
|  | new repack |
| channel; Prepare |  |
|  | FCC Form 2100 |
|  | Schedule 399 |
|  | Budget and |
|  | Narrative for filing in |
|  | initial CP Filing |
|  | Window. 11.5 hours |
|  | $\$ 3,047.50$ |

Prepare engineering section of FCC Form 2100 (main), License to Cover Application

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application

Perform engineering study for new channel
assignment and antenna development

Information not provided.

\begin{tabular}{|c|c|}
\hline Component Description:

Amount: \& | WUBX-CD Durham, |
| :--- |
| NC Prepare |
| technical portions of |
| FCC Form 2100 |
| Construction Permit |
| Application and |
| Engineering |
| Exhibits required to |
| be filed with initial |
| repack Construction |
| Permit Application - |
| filing window. 12.0 |
| hours |
| \$3,180.00 | <br>

\hline Component Description: \& | Conduct Study for |
| :--- |
| Alternative Antenna; |
| Prepare and File |
| FCC Modification of |
| Construction Permit |
| form 2100; Prepare |
| TPO \& Tech |
| Summary |
| Calculations for WUBX-CD Durham, NC | <br>

\hline
\end{tabular}

| Component Description: | - Analyze potential <br> early transition for |
| :--- | :--- |
|  | WUBX-CD |
|  | $\$ 662.50$ |


|  | Component Description: Amount: | Conduct Study, <br> Prepare and File FCC CP <br> Modification of Construction Permit form 2100 for change in antenna height on tower for WUBX-CD \$1,258.75 |
| :---: | :---: | :---: |
|  | Component Description: | WUBX-CD Durham, NC Conduct <br> TVStudy analysis of initial channel assignment and analyze interference issues with new repack channel assignment. 17.25 hours \$6,360.00 |
|  | Component Description: <br> Amount: | WUBX-CD Durham, NC Develop azimuth antenna pattern and determine antenna required for FCC <br> Form 2100 <br> Construction Permit <br> Application for initial <br> Repack Channel CP <br> filing. 6.75 hours <br> $\$ 1.00$ |
| Prepare and or review reimbursement form | Information not provided. |  |
| Project management of the transition |  |  |


| Component Description: | Project |
| :---: | :---: |
|  | Management services, research and coordination w /rf engineering, equipment vendors and site owners |
| Amount: | \$1,500.00 |
| Component Description: | Project |
|  | Management services, planning and coordination |
| Amount: | \$1,500.00 |
| Component Description: | REPACK PROJECT |
|  | MANAGEMENT |
|  | SERVICES. |
|  | RESEARCH AND |
|  | COORDINATION W /RF |
|  | ENGINEERING, ATTORNEY, EQUIPMENT |
|  | VENDORS AND |
|  | SITE OWNER |
| Amount: | \$1,500.00 |
| Component Description: | PROJECT |
|  | MANAGEMENT |
|  | SERVICES |
| Amount: | \$3,750.00 |
| Component Description: | PROJECT |
|  | MANAGEMENT |
|  | SERVICES |
| Amount: | \$3,000.00 |



| Component Description: | Prepare FCC Form |
| :--- | :--- |
|  | 387 Repack |
|  | Progress Report |
|  | Filing. WUBX-CD |
| Amount: | $\$ 1,192.50$ |

## 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 <br> Cost | Estimated <br> Cost <br> Justification | Actual <br> Cost | Actual Cost Justification |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Other Expenses | \$26,885.00 | \$21,497.00 |  | \$6,172.00 |  |
| Develop and air announcement of upcoming channel change | \$2,500.00 | \$2,500.00 | It is required that the applicant give notification to viewers of the repack channel change. <br> Applicant has limited internal resources to create and produce such notifications and will most likely have to obtain the services from an outside vendor. | N/A | N/A |


| Equipment Storage | \$2,500.00 | \$2,500.00 | Applicant may receive antenna and transmitter parts prior to set installation dates. There is no on-site storage available and applicant may be forced to use outside temporary storage facilities. | N/A | N/A |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Equipment <br> Delivery and <br> Handling <br> Charges | \$5,000.00 | \$5,000.00 | It is possible other unknown expenses may arise that are not identified on this budget submission. The amount proposed is less than 3\% of the total project cost to cover such contingencies. | N/A | N/A |


| Disposal <br> Costs (for equipment and other waste, net of any salvage value) | \$1,000.00 | \$1,000.00 | Applicant will be required to dispose of the current pre-repack antenna and parts that were replaced for transmitter retuning. The exact costs are not known at this time. | N/A | N/A |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Non-zoning permits | \$2,000.00 | \$2,000.00 | It is currently unknown <br> what the city or county may levy on applicant in terms of a building permit to perform the tower work required. It is felt this estimate should cover the associated costs for any required permits. | N/A | N/A |


| Local Zoning | $\$ 2,000.00$ | $\$ 2,000.00$ | It is currently <br> unknown <br> what the <br> local zoning <br> authority or <br> city/county <br> may levy on <br> applicant to <br> perform the <br> tower work <br> required. It is <br> felt this <br> estimate | N/A |  |
| :--- | :---: | :---: | :---: | :---: | :---: |

## Components

| Actual Information <br> Description | File Name |
| :--- | :--- |
| Develop and air <br> announcement of upcoming <br> channel change | Information not provided. |
| Equipment Storage | Information not provided. |
| Equipment Delivery and |  |
| Handling Charges | Information not provided. |


| Disposal Costs (for <br> equipment and other waste, <br> net of any salvage value) | Information not provided. |  |
| :--- | :--- | :--- |
| Non-zoning permits | Information not provided. |  |
| Local Zoning | Information not provided. |  |
| FCC Filing Fees - Form <br> 2100 license to cover <br> application | Information not provided. |  |
| DTV Medical Facility |  | Component Description: |
| Notification |  | DTV Notification |
|  |  | Service: |
|  |  | Notification of |
|  |  | Medical Facilities |
|  |  | Medical Facility |
|  |  | Notification per |
|  |  | proposal |
|  |  | \$6,172.00 |


|  | Predetermined <br> Cost Estimate | Estimated Cost | Actual Cost |
| :--- | :--- | :--- | :--- |
| Total for all systems | $\$ 597,180.00$ | $\$ 413,440.75$ | $\$ 54,105.75$ |

## 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.

| 8. 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 pre-requisite 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. | Robert <br> Wayne <br> Jordan <br> ENGINEER |

## Attachments

