



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **39736** | Service: **DTV** | Call **WFLX** | Channel: **35 (UHF)** |
ID: | Sign:
File **0000024802**
Number:
FRN: **0018223693** | Date **05/18**
Submitted: **/2020**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|-----------------------------------------------------------------------|------------------------------------------------------------------|-------------------|------------------|---------------------------|
| GRAY TELEVISION LICENSEE, LLC Doing Business As: WFLX TV | 4370 PEACHTREE ROAD, NE ATLANTA, GA 30319 United States | +1 (404) 504-9828 | allfclms@gray.tv | Limited Liability Company |

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 |
|----------|----------|
|----------|----------|

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>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.</p> | <p>Yes</p> |
| <p>Briefly describe transition plan</p> | <p>Install interim tx on ch-27 utilizing existing interim antenna and line Remove and replace existing top mounted antenna Re-use existing transmission line Install new main and standby transmitters</p> |

Transmitters

| Section | Question | Response |
|--------------------------------------------|--------------------------------------------------|------------|
| <p>Transmitter Related Expenses</p> | <p>Do you have transmitter related expenses?</p> | <p>Yes</p> |

**Auxiliary
Transmitter****Add Transmitter Information**

| Section | Question | Response |
|-------------------------------------------------------|------------------------------------------------------------|-----------------------|
| Existing Transmitter Description | Type of change | Purchase New |
| | Use | Auxiliary (Backup) |
| | Description of Use | Emergency Backup |
| | 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 and Type | Manufacturer | |
| | Model | Ranger |
| | Year | 2009 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 1.1 kW |

**Auxiliary
Transmitter****New Transmitter Costs**

| Section | Question | Response |
|------------------------|-------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| New Transmitter | Use | Auxiliary (Backup) |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | No |
| | Manufacturer | |
| | Model | UAXTE-2R37 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power capacity | 1.2 kW |
| | Justification for New Transmitter | Existing transmitter can not be returned Manufacturers letter attached. tx to be used as interim with new ch-27 filter |

**Auxiliary
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 |

Auxiliary Transmitter **Other Transmitter Cost Not Listed**

Information not provided.

**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 and Type | Manufacturer | |
| | Model | CCT-U- DCX 1H |
| | Year | 2003 |
| | Type | Inductive Output Tube |
| | IOT Power Type | Single |
| | Power Capacity | 20 kW |

**Primary
Transmitter**

New Transmitter Costs

| Section | Question | Response |
|------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| New Transmitter | Use | Primary (Main) |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | Yes |
| | Manufacturer | |
| | Model | ULXTE-80 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power capacity | 50.1 kW |
| | Justification for New Transmitter | Existing IOT transmitter can not be returned. Manufacturers comments attached. Solid state is a less expensive option than a two tube IOT. Headroom analysis attached. |

**Primary
Transmitter**

Other Transmitter Costs

| Section | Question | Response |
|---------------------------|---------------------------------------|----------|
| Electrical Service | Service Entrance (3 phases 800A 208V) | No |
| | Switchgear (industrial 800 amp) | Yes |
| | Transformer (480V) | Yes |
| | Power | 300 kVA |
| | 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**
Information not provided.

Antennas

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

**Auxiliary
Antenna****Add Antenna Information**

| Section | Question | Response |
|---------------------------------------------------|-----------------------------------------------------------------|-----------------------|
| Existing Antenna Description | Type of change | Retune Existing |
| | Antenna Use | Auxiliary (Backup) |
| | Description of Use | Standby |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is this antenna currently shared with any other stations? | Yes |
| | Is this 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 | Broadband Panel |
| | Number of Stations Supported | 2 |
| | Number of Panels | 12 |
| | Design power capacity in use | 90.0 % |
| Lower Limit | 540.00 MHz | |

| | |
|------------------------------------------|--------------------|
| Upper Limit | 650.00 MHz |
| Other Antenna Type | N/A |
| ERP: (Effective Radiated Power) | 1000.0 kW |
| Manufacturer | Dielectric |
| Model | TUA-SP4- 12/48H |
| Year | 2003 |

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

| Facility ID | Call Sign |
|-------------|-----------|
| 83929 | WHDT |

Auxiliary Antenna

Adjustment to Existing Antenna

| Section | Question | Response |
|---------------------------------------|-----------------------------------------------|----------|
| Sweep Test of Existing Antenna | Do you need a sweep test of existing antenna? | |

Auxiliary 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 | |

**Auxiliary
Antenna**

Other Antenna Cost Not Listed

Information not provided.

**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 | Top 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) | 630.0 kW |

| | |
|--------------|-------------------|
| Manufacturer | |
| Model | TFU-31ETT P210 |
| Year | 2008 |

**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 | 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 |
| Mounting | | Top 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) | | 728.0 kW |
| Manufacturer | | |

| | |
|-------------------------------|--------------------------------------|
| Model | TFU-16ETT /VP-R P210 |
| Year | 2018 |
| Justification for New Antenna | Existing antenna can not be re-tuned |

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 transmission line and antenna? | Yes |

**Primary
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 | Rigid |
| | Diameter | 8 3/16 inches |
| | Other Diameter | N/A |
| | Segment Length | 19 3/4 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 1566 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 | Rigid |
| | Diameter | 6 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | 20 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 1600 feet per run |
| | Justification for New Transmission Line | Existing line segment lengths will not work on the new repack channel. |

Primary Transmission Line **Other Transmission Line Expenses Not Listed**

Information not provided.

Tower Equipment And Rigging Costs

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

Primary Tower

Existing Tower

| Section | Question | Response |
|----------------------------------------------------|---------------------------------------------------------|-------------------|
| Existing Tower Description | Type of change | Modify Existing |
| | Tower Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Is this tower consider Complex? | No |
| | Is this tower currently shared with any other stations? | 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? | No |
| Existing Tower Structure Registration | Do you have a tower registration number? | Yes |
| | ASR Number | 1028084 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 26° 34' 30.7" N- |
| | Longitude (NAD83) | 080° 14' 31.1" W- |
| | Overall Structure Height | 1532.00 feet |
| | Support Structure Height | 1496.00 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 17.00 feet |

| | |
|------------------|------------------------------------------|
| Structure Type | TOWER - Free Standing or Guyed Structure |
| Tower Owner | WFLX LLC |
| Date Constructed | 08/01/1982 |

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 |
|-------------|-----------|---------|
| 83929 | WHDT | DTV |
| 20436 | WRMF | FM |
| 61084 | WXEL-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 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 | N/A |
| Helicopter Services Required | Are helicopter services required? | No |

**Primary
Tower**

Other Tower Expenses Not Listed

| Name | Description |
|--------------------------|---------------------------------------------------------------------------------|
| Construction Mats | required for tag line per conservation permit. Permit and rental quote attached |

**Outside
Professional
Services
Costs**

| Section | Question | Response |
|---------------------------------------------------|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 595 |
| | Explanation | Pattern analysis Antenna Spec Transmitter Spec Building drawings Installation Supervision Accounting Internal Legal 399 Prep |
| 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 | No |
| | Environmental Assessment | No |
| | ASR Modification | No |
| | FAA Consultation (including preparation of FAA Form 7460) | No |
| | Negotiation of Lease and other Matter for Shared Locations | No |
| | Prepare or Review FCC Form 399 for Reimbursement | No |
| Address transition timing and coordination issues w/ other stations and wireless providers | No | |
| RF Field Engineering Services | Comprehensive coverage verification via field study | Yes |
| | RF exposure measurements | No |
| | Additional Field Engineering Service | No |
| | Number of Days | N/A |
| | Justification | N/A |

Other Professional Services Expenses Not Listed

**Outside
Professional
Services
Costs**

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

**Other
Expenses**

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 ULXTE-80 | \$2,221,263.25 | \$1,532,776.77 | | \$1,440,030.23 | |
| UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW | \$1,473,000.00 | \$814,063.90 | ***System Notice: Estimate adjusted and locked because line has been superseded. ***Per Gates Air Quote Q-69671 & upgrade quote Q-73819 Headroom analysis attached | \$814,063.90 | N/A |
| UHF - Liquid Cooled Solid State Transmitter 50.1 kW | <i>\$673,263.25</i> | \$673,263.25 | GatesAir quotes Q-73819 and Q-69671, less amount reimbursed in superseded category | \$625,966.33 | N/A |
| Transformer 3 phase /480v - 300 KVA | \$36,800.00 | \$7,766.42 | N/A | \$0.00 | N/A |

| | | | | | |
|-----------------------------------------------------------------|-----------------------|-----------------------|-------------------------------|-----------------------|-----|
| Switchgear - industrial 800 amp | \$38,200.00 | \$37,683.20 | GatesAir Quote Q- 69671 | \$0.00 | N/A |
| Auxiliary Transmitter UAXTE-2R37 | \$126,000.00 | \$60,793.56 | | \$42,736.58 | |
| UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW | \$126,000.00 | \$60,793.56 | Quote attached | \$42,736.58 | N/A |
| Sub-total | \$2,347,263.25 | \$1,593,570.33 | N/A | \$1,482,766.81 | N/A |
| Total for all systems | \$3,643,454.04 | \$2,749,259.07 | N/A | \$1,994,713.79 | N/A |

Components

| Actual Information Description | File Name |
|-----------------------------------|-----------|
|-----------------------------------|-----------|

UHF - Liquid Cooled Solid
State Transmitter 35 - 50 kW

Component Description: Waste disposal
Amount: \$585.28

Component Description: Invoice moved as
the category was
superseded.
Amount: N/A

Component Description: Line interactive,
1.00KVA, 120VAC
Amount: \$394.41

Component Description: Invoice moved as
the category was
superseded.
Amount: N/A

Component Description: Primary
Trnasmitter
Amount: \$137,034.56

Component Description: Transmitter
Amount: \$676,049.65

Component Description: Invoice moved as
the category was
superseded.
Amount: N/A

| | |
|-----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| UHF - Liquid Cooled Solid State Transmitter 50.1 kW | Component Description: Transmitter Amount: \$103,314.35 |
| | Component Description: Transmitter Amount: \$317,100.15 |
| | Component Description: Transmitter Amount: \$205,551.83 |
| Transformer 3 phase/480v - 300 KVA | Information not provided. |
| Switchgear - industrial 800 amp | Information not provided. |
| UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW | Component Description: MASK 1.25KW 6P UHF ATSC/6 TUNE Amount: \$3,278.48 |
| | Component Description: Transmitter, Mask Filter Saystem, RF Accessories, Electrical, Installation & Proof Amount: \$7,891.62 |
| | Component Description: UAXTE-2R37 Amount: \$5,261.08 |
| | Component Description: Transmitter, Mask Filter Saystem, RF Accessories, Electrical, Installation & Proof Amount: \$26,305.40 |

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 TFU-16ETT /VP-R P210 | \$296,230.00 | \$228,981.45 | | \$199,935.94 | |
| Sweep test of existing antenna | \$6,730.00 | \$11,486.76 | Estimated Cost Justification WFLX-210-Primary Antenna - Sweep Test v0 | \$6,400.00 | per invoices received |
| UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized | \$289,500.00 | \$217,494.69 | see Estimated Cost Justification WFLX-210-Primary Antenna - UHF High Power Top Mount, E-POL v0 | \$193,535.94 | N/A |
| Auxiliary Antenna TUA-SP4-12/48H | \$6,730.00 | \$6,400.00 | | \$0.00 | |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | \$0.00 | N/A |
| Sub-total | \$302,960.00 | \$235,381.45 | N/A | \$199,935.94 | N/A |

| | | | | | |
|------------------------------|----------------|----------------|-----|----------------|-----|
| Total for all systems | \$3,643,454.04 | \$2,749,259.07 | N/A | \$1,994,713.79 | N/A |
|------------------------------|----------------|----------------|-----|----------------|-----|

Components

| Actual Information Description | File Name |
|--------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sweep test of existing antenna | Component Description: Invoice moved to correct budget category per NMI message. Amount: N/A |
| | Component Description: OTHER INCLUDES ONE FIELD ENGINEER ON-SITE Amount: \$1,600.00 |
| | Component Description: WFLX-210-Primary Antenna - Sweep Test Amount: \$3,200.00 |
| | Component Description: WFLX Sweep Test Amount: \$1,600.00 |

| | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------|-----------------------|--------------------|--------------------------------------|----------------------------|-----------------------|-------------------|--------------------------------------|---------------------------------|-----------------------|--------------------|--------------------------------------|---------------------------------------------------------------------|-----------------------|--------------------|--------------------------------------|-----------------------------------------------------|-----------------------|--------------------|
| <p>UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized</p> | <table border="0"> <tr> <td data-bbox="707 91 1141 324"> <p>Component Description:</p> </td> <td data-bbox="1141 91 1428 324"> <p>UHF - HIGH POWER TOP MOUNT (200 - EA 1,000 KW)</p> </td> </tr> <tr> <td data-bbox="707 324 1141 459"> <p>Amount:</p> </td> <td data-bbox="1141 324 1428 459"> <p>\$41,311.88</p> </td> </tr> <tr> <td data-bbox="707 459 1141 683"> <p>Component Description:</p> </td> <td data-bbox="1141 459 1428 683"> <p>OTHER ELBOW COMPLEX</p> </td> </tr> <tr> <td data-bbox="707 683 1141 817"> <p>Amount:</p> </td> <td data-bbox="1141 683 1428 817"> <p>\$3,395.62</p> </td> </tr> <tr> <td data-bbox="707 817 1141 1041"> <p>Component Description:</p> </td> <td data-bbox="1141 817 1428 1041"> <p>UHF High Power Top Mount</p> </td> </tr> <tr> <td data-bbox="707 1041 1141 1176"> <p>Amount:</p> </td> <td data-bbox="1141 1041 1428 1176"> <p>\$90,532.50</p> </td> </tr> <tr> <td data-bbox="707 1176 1141 1400"> <p>Component Description:</p> </td> <td data-bbox="1141 1176 1428 1400"> <p>WFLX-210- Primary Antenna - UHF High Power Top Mount, E- POL</p> </td> </tr> <tr> <td data-bbox="707 1400 1141 1503"> <p>Amount:</p> </td> <td data-bbox="1141 1400 1428 1503"> <p>\$13,029.69</p> </td> </tr> <tr> <td data-bbox="707 1503 1141 1615"> <p>Component Description:</p> </td> <td data-bbox="1141 1503 1428 1615"> <p>Antenna, Elbow Complex, Engineer, Repackvpol</p> </td> </tr> <tr> <td data-bbox="707 1615 1141 1727"> <p>Amount:</p> </td> <td data-bbox="1141 1615 1428 1727"> <p>\$45,266.25</p> </td> </tr> </table> | <p>Component Description:</p> | <p>UHF - HIGH POWER TOP MOUNT (200 - EA 1,000 KW)</p> | <p>Amount:</p> | <p>\$41,311.88</p> | <p>Component Description:</p> | <p>OTHER ELBOW COMPLEX</p> | <p>Amount:</p> | <p>\$3,395.62</p> | <p>Component Description:</p> | <p>UHF High Power Top Mount</p> | <p>Amount:</p> | <p>\$90,532.50</p> | <p>Component Description:</p> | <p>WFLX-210- Primary Antenna - UHF High Power Top Mount, E- POL</p> | <p>Amount:</p> | <p>\$13,029.69</p> | <p>Component Description:</p> | <p>Antenna, Elbow Complex, Engineer, Repackvpol</p> | <p>Amount:</p> | <p>\$45,266.25</p> |
| <p>Component Description:</p> | <p>UHF - HIGH POWER TOP MOUNT (200 - EA 1,000 KW)</p> | | | | | | | | | | | | | | | | | | | | |
| <p>Amount:</p> | <p>\$41,311.88</p> | | | | | | | | | | | | | | | | | | | | |
| <p>Component Description:</p> | <p>OTHER ELBOW COMPLEX</p> | | | | | | | | | | | | | | | | | | | | |
| <p>Amount:</p> | <p>\$3,395.62</p> | | | | | | | | | | | | | | | | | | | | |
| <p>Component Description:</p> | <p>UHF High Power Top Mount</p> | | | | | | | | | | | | | | | | | | | | |
| <p>Amount:</p> | <p>\$90,532.50</p> | | | | | | | | | | | | | | | | | | | | |
| <p>Component Description:</p> | <p>WFLX-210- Primary Antenna - UHF High Power Top Mount, E- POL</p> | | | | | | | | | | | | | | | | | | | | |
| <p>Amount:</p> | <p>\$13,029.69</p> | | | | | | | | | | | | | | | | | | | | |
| <p>Component Description:</p> | <p>Antenna, Elbow Complex, Engineer, Repackvpol</p> | | | | | | | | | | | | | | | | | | | | |
| <p>Amount:</p> | <p>\$45,266.25</p> | | | | | | | | | | | | | | | | | | | | |
| <p>Sweep test of existing antenna</p> | <p>Information not provided.</p> | | | | | | | | | | | | | | | | | | | | |

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 | \$323,200.00 | \$212,161.50 | | \$3,486.32 | |
| Rigid Transmission Line - copper, 6 1/8" | \$323,200.00 | \$212,161.50 | Dielectric Quote 513583JKT Rev 1 | \$3,486.32 | N/A |
| Sub-total | \$323,200.00 | \$212,161.50 | N/A | \$3,486.32 | N/A |
| Total for all systems | \$3,643,454.04 | \$2,749,259.07 | N/A | \$1,994,713.79 | N/A |

Components

| Actual Information | |
|------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Description | File Name |
| Rigid Transmission Line - copper, 6 1/8" | <p>Component Description: OTHER FREIGHT, SHIPPING, AND HANDLING</p> <p>Amount: \$1,948.67</p> <p>Component Description: Adapter 7/16 DIN (F) to 3-50 EIA (M) GP</p> <p>Amount: \$978.90</p> <p>Component Description: OTHER T/L 8-75 EIA LENGTH 10'</p> <p>Amount: \$558.75</p> |

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 | \$413,400.00 | \$414,550.00 | | \$227,000.00 | |
| Tall Tower (greater than 500') | \$210,500.00 | \$222,750.00 | See attached Tower King II, Inc proposal C-19-007 | \$222,750.00 | N/A |
| Structural engineering tower load study for well documented tower | \$12,600.00 | \$9,500.00 | N/A | \$4,250.00 | N/A |
| Construction Mats | <i>\$32,300.00</i> | \$32,300.00 | Superior Mat Co. rental quote attached. Required per South Florida Water Management permit (attached) | N/A | N/A |
| Minor tower reinforcement /modifications | \$158,000.00 | \$150,000.00 | N/A | N/A | N/A |
| Sub-total | \$413,400.00 | \$414,550.00 | N/A | \$227,000.00 | N/A |
| Total for all systems | \$3,643,454.04 | \$2,749,259.07 | N/A | \$1,994,713.79 | N/A |

Components

| Actual Information | |
|-------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Description | File Name |
| Tall Tower (greater than 500') | Component Description: Tower Service Amount: \$147,750.00 |
| | Component Description: Tower Service - Down Payment for WFLX-TV Repack Install line from WFLX filter out to WXEL combiner input Amount: \$75,000.00 |
| Structural engineering tower load study for well documented tower | Component Description: Structural analysis to original design standard Amount: \$2,250.00 |
| | Component Description: Structural analysis to original design standard Amount: \$2,250.00 |
| | Component Description: 1.000 003 Engineering / Amount: \$2,000.00 |
| Construction Mats | Information not provided. |
| Minor tower reinforcement /modifications | 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 | \$203,660.00 | \$248,425.00 | | \$69,133.93 | |
| Comprehensive coverage verification via field study, if needed | \$84,200.00 | \$80,000.00 | N/A | \$5,018.48 | 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 - 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 | N/A | N/A |
| Prepare request for Special Temporary Authorization | \$2,050.00 | \$1,500.00 | N/A | \$250.00 | 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 engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | N/A | \$2,000.00 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$812.50 | N/A |
| Project management of the transition | \$94,010.00 | \$144,675.00 | Widality Strategic Support Quote | \$61,052.95 | N/A |
| Sub-total | \$203,660.00 | \$248,425.00 | N/A | \$69,133.93 | N/A |
| Total for all systems | \$3,643,454.04 | \$2,749,259.07 | N/A | \$1,994,713.79 | N/A |

Components

| Actual Information | |
|------------------------------------------------------------------------------|-------------------------------------------------|
| Description | File Name |
| Comprehensive coverage verification via field study, if needed | Component Description: Amount: |
| | Comp Coverage \$5,018.48 |
| 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 - Prepare and File FCC Form 2100 (main), Construction Permit Application | Information not provided. |
| Prepare request for Special Temporary Authorization | <p>Component Description: RF Eng - Special Temporary Authorization</p> <p>Amount: \$250.00</p> |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | <p>Component Description: Preparation of Engineering Section FCC form 2100</p> <p>Amount: \$2,000.00</p> |

Perform engineering study for new channel assignment and antenna development

Component Description: Engineering study work for new channel assignment and antenna development.

Amount: \$500.00

Component Description: Engineering study work for new channel assignment and antenna development.

Amount: \$125.00

Component Description: WFLX-530-RF Eng - Engineering Study for New Channel Assignment

Amount: \$187.50

Project management of the transition

Component Description: Project Management

Amount: \$2,751.70

Component Description: Project Management

Amount: \$3,930.90

Component Description: Project Management

Amount: \$3,503.40

Component Description: Project Management

Amount: \$2,760.95

Component Description: Project
Management
Amount: \$2,300.65

Component Description: Project
Management
Amount: \$847.00

Component Description: Project
Management
Amount: \$2,673.90

Component Description: Project
Management
Amount: \$3,301.90

Component Description: Project
Management
Amount: \$2,166.05

Component Description: Project
Management
Amount: \$4,603.25

Component Description: Project
Management
Amount: \$6,800.90

Component Description: Project
management
Amount: \$5,514.50

Component Description: Project
Management
Amount: \$4,222.45

Component Description: Project
Management
Amount: \$3,195.85

Component Description: Project
Management
Amount: \$184.81

Component Description: Project
Management
Amount: \$3,853.75

Component Description: Project
Management
Amount: \$2,752.55

Component Description: Project
Management
Amount: \$213.04

Component Description: Project
Management
Amount: \$2,780.70

Component Description: Project
Management
Amount: \$2,212.45

Component Description: Project
Management
Amount: \$4,054.10

Component Description: Travel Fares
Amount: \$650.60

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 | \$52,970.79 | \$45,170.79 | | \$12,390.79 | |
| DTV Medical Facility Notification | \$11,550.00 | \$3,750.00 | Group quote attached | \$3,750.00 | N/A |
| MVPD Notification of Channel Change | <i>\$3,750.00</i> | \$3,750.00 | Quote attached | \$0.00 | N/A |
| Develop and air announcement of upcoming channel change | <i>\$2,850.00</i> | \$2,850.00 | on air rescan announcement Quote attached | N/A | N/A |
| Equipment Storage | <i>\$30,500.00</i> | \$30,500.00 | Estimate for Dielectric on site antenna storage Dielectric letter attached | \$4,320.00 | N/A |
| Equipment Delivery and Handling Charges | <i>\$4,320.79</i> | \$4,320.79 | On site forklift rental estimate Representative quote attached Per United Rentals Invoice 163258580-001 | \$4,320.79 | N/A |
| Sub-total | \$52,970.79 | \$45,170.79 | N/A | \$12,390.79 | N/A |
| Total for all systems | \$3,643,454.04 | \$2,749,259.07 | N/A | \$1,994,713.79 | N/A |

Components

| Actual Information | |
|---------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Description | File Name |
| DTV Medical Facility Notification | <p>Component Description: Medical Notification Mailing</p> <p>Amount: \$3,750.00</p> |
| MVPD Notification of Channel Change | Information not provided. |
| Develop and air announcement of upcoming channel change | Information not provided. |
| Equipment Storage | <p>Component Description: WFLX-610-Equipment Storage</p> <p>Amount: \$4,320.00</p> |
| Equipment Delivery and Handling Charges | <p>Component Description: Forklift Variable Reach 10000# 50' & UP</p> <p>Amount: \$2,786.63</p> <p>Component Description: Forklift Variable Reach 7000# 38-44'</p> <p>Amount: \$1,534.16</p> |

Cost Information **Grand Total**

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|------------------------------|------------------------------------|-----------------------|--------------------|
| Total for all systems | \$3,643,454.04 | \$2,749,259.07 | \$1,994,713.79 |

Reimbursement Status

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

| Certification | Section | Question | Response |
|---------------|-----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| | <p>Submission of Estimated Expenses Statements</p> | <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.

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 above-named applicant for the Authorization(s) specified above.

**Robert
Folliard , III**
.
*Assistant
Secretary*

05/18/2020

| Certification | Section | Question | Response |
|---------------|------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| | <p>Submission of Actual Cost Documentation Statements</p> | <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.

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 above-named applicant for the Authorization(s) specified above.

**Robert
Folliard , III**
.
*Assistant
Secretary*

05/18/2020

Attachments