

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility ID:	24618	Service: DTV	Call Sign:	WGNM	Channel: 33 (UHF)
File Number:	000002	7788			
FRN: 00 1	10360873	Date Submitted:	06/29 /2020		

Applicant Name, Type, and Contact Information

Information

Applicant	Address	Phone	Email	Applicant Type
CHRISTIAN TELEVISION NETWORK, INC. Doing Business As: CHRISTIAN TELEVISION NETWORK, INC.	P.O. Box 6922 Clearwater, FL 33758 United States	+1 (727) 535- 5622	soneal@ctntv. net	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
	Joseph C. Chautin III Hardy, Carey, Chautin & Balkin LLP	1080 West Causeway Approach Mandeville, LA 70471 United States	+1 (985) 629-0777	jchautin@hardycarey. com

Broadcaster	Question	Response
Information and Transition Plan	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.	Νο
	Briefly describe transition plan	WGNM will install temp low power antenna & line. Existing xmtr will feed temp LP antenna thru mask filter. Removal of old antenna & transmission line. Then, installation of new antenna, new transmission line, mask filter and transmitter to begin

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

Primary	Existing Transmitter Information				
Transmitter	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	Visionary		
		Year	2004		
		Туре	Inductive Output Tube		
		IOT Power Type	Single		
		Power Capacity	24 kW		

Existing Transmitter Information

Primary	New Transmitter Costs				
Transmitter	Section	Question	Response		
	New Transmitter	Use	Primary (Main)		
		Change Type	Purchase New		
		Is this a request for upgraded equipment?	Yes		
		Manufacturer			
		Model	HPTV-PRLX- U16		
		Transmitter Type	Solid State		
		Solid State Cooling	Liquid Cooled		
		Solid State Power capacity 27.5	27.5 kW		
		Justification for New Transmitter	Manufacturer (Axcera) no longer in business. Existing transmitter not supported. Also, please see attached justification regarding replacement transmitter and TPO.		

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		

Other Transmitter Costs

	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	Yes
	Description	additional breakers in panel, EMT or flexible metal conduit, misc wiring
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Туре	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

Primary Other Transmitter Cost Not Listed Transmitter Name

ter	Name	Description
	Primary Transmitter Installation	Primary Transmitter Installation
	anti-freeze	coolant anti-freeze
	transmission line	transmitter building interior transmission line components for transmitter interconnects

Antennas Section		Question	Response
Antenna Rela	ated Expenses	Do you have antenna related expenses?	Yes

Existing Antenna Information

Primary

Antenna	Section	Question	Response
	Existing Antenna Description	Type of change	Purchase New
		Antenna Use	Primary (Main)
		Description of Use	N/A
		Ownership	Owned
		Owner	N/A
		Site	N/A
		Is the existing antenna shared with another station or stations?	No
		Is the existing antenna directional?	Yes
		Is antenna in operating condition?	Yes
		Is antenna located on or in close proximity to an antenna farm?	No
	Existing Antenna Manufacturer and Type	Class	Full Power
		Mounting	Side Mount
		Antenna position in stack	Not in Stack
		Polarization	Horizontal
		Туре	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)	1000.0 kW
		Manufacturer	
	-		

Model	PSIUSMD24AC3- 45
Year	2004

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	Full Power		
		Mounting	Side Mount		
		Antenna position in stack	Not in Stack		
		Polarization	Horizontal		
		Туре	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)	793.0 kW		
		Manufacturer			
			1		

Model	TFU- 24DSC-R C200
Year	2017
Justification for New Antenna	Existing antenna cannot be re- channeled

Primary Antenna	Other Antenna Costs			
	Section	Question	Response	
	Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?		
		Туре		
		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 Other Antenna Cost Not Listed

Antenna Information not provided.

Interim Antenna	New Antenna Costs				
	Section	Question	Response		
	New Antenna Description	Use	Interim		
		Description of Use	N/A		
		Change Type	Purchase New		
		Ownership	Owned		
		Owner	N/A		
		Is antenna shared?	No		
		Is antenna directional?	Yes		
		Will antenna be located on or in close proximity to an antenna farm?	No		
	New Antenna Manufacturer and Type	Class	Class A		
		Mounting	Side Mount		
		Antenna position in stack	Not in Stack		
		Polarization	Horizontal		
		Туре	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)	4.5 kW		
		Manufacturer			
		Model	75010402		
		Year	2019		
	-				

Justification for New Antenna	The interim antenna is required for continuous broadcast while the main antenna is replaced.

Interim Antenna	Other Antenna Costs		
	Section	Question	Response
	Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No
		Broadband or Single Channel?	N/A
		Feed Line Size	N/A
	Side Mount Brackets	Do you require the separate purchase of side mount brackets for an antenna?	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

Other Antenna Cost Not Listed

Interim Antenna

Information not provided.

Transmissior	n Seffien	Question	Response
	Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

Primary	Existing Transmission Line			
Transmissio	n 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	Manufacturer		
Line Mai Type	Line Manufacturer and Type	Туре	Rigid	
		Diameter	6 1/8 inches	
		Other Diameter	N/A	
		Segment Length	19 3/4 inches	
		Other Segment Length	N/A	
		Number of parallel runs	1	
		Length	720 feet per run	

Primary	New Transmission Line			
Transmission	n 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	6 1/8 inches	
		Other Diameter	N/A	
		Segment Length	19 1/2 inches	
		Other Segment Length	N/A	
		Number of parallel runs	1	
		Length	720 feet per run	
		Justification for New Transmission Line	The rigid transmission line section size recommended by Dielectric is 19.5' for channel 33. WGNM's existing transmission line is Myat line and Myat also recommends 19.5' sections (see DIE and Myat quotes). Applicant requests manufacturer recommended sizes	

Other Transmission Line Expenses Not Listed Transmission

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

marv	Existing	Tower
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Primary	Existing Tower	xisting Tower					
Tower	Section	Question	Response				
	Existing Tower Description	Type of change	Move Equipment				
		Tower Use	Primary (Main)				
		Description of Use	N/A				
		Ownership	Leased				
		Is this tower consider Complex?	No				
		Is this tower currently shared with any other stations?	No				
		One or more FM, AM or TV radio broadcaster(s)	N/A				
		Others Types of Users	N/A				
		Is tower documented for structural analysis?	Unknown				
		Is tower compliant with Rev G?	? Unknown Unknown				
	Existing Tower Structure	Do you have a tower registration number?	Yes				
	Registration	ASR Number 1045					
	Coordinates (NAD83 (North American Datum of	Latitude (NAD83)	32° 45' 52.0" N-				
	1983))	Longitude (NAD83)	083° 33' 32.0" W-				
		Overall Structure Height	636.48 feet				
		Support Structure Height	629.91 feet				
		Ground Elevation Above Mean Sea Level (AMSL)	495.07 feet				

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	T-Mobile South LLC
Date Constructed	06/02/1999

Tower Rigging Costs Primary Tower

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

Other Tower Expenses Not Listed

Primary Tower Information not provided.

Outside	Section	Question	Response
Professional	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	595
		Explanation	Project management (Invoice processing, progress reporting, daisy chain monitoring and analysis, program management, and site visits as 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	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
Services	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	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	No
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	Yes
	Number of Days	2
	Justification	optimization of new transmission line to operated on new channel

Outside Other Professional Services Expenses Not Listed Professional Services Costs Description

Attorney - Other Matters	Legal Services

Other	Section	Question	Response	
Expenses	AM Pattern Disturbance	Is an Impact Study needed?	No	
		Is Remediation needed?		
	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?	NoN/AN/AN/AN/AN/ANoNoNoNoNoNoYes	
	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	Yes	
	Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes	
		Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes	
		Does this relocation require Equipment Storage?	No	
		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 Not Listed

Expenses Information not provided.

Transmitters

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Co Justificati
Primary Transmitter HPTV-PRLX- U16	\$963,333.74	\$933,917.48		\$921,717.46	
Primary Transmitter Installation	\$4,133.74	\$4,133.74	Please see WGNM Primary Transmitter Installation Budget Justification Cover Letter	\$4,133.74	N/A
anti-freeze	\$200.00	\$200.00	needed coolant for heat exchanger	N/A	N/A
Other Electrical Service: additional breakers in panel, EMT or flexible metal conduit, misc wiring	\$7,000.00	\$7,000.00	interconnect needed from existing electrical service to new transmitter components	N/A	N/A
transmission line	\$5,000.00	\$5,000.00	interconnect transmission line components within transmitter building	N/A	N/A

UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$917,583.74	see Estimated Cost Justification WGNM-110-1st Primary Transmitter - UHF Liquid Cooled Solid State, 21-31 kW v0 and Hitachi Comark Proposal P#3220PRLXU16- 072417	\$917,583.72	N/A
Sub-total	\$963,333.74	\$933,917.48	N/A	\$921,717.46	N/A
Total for all systems	\$1,709,961.94	\$1,645,550.49	N/A	\$1,334,403.32	N/A

Actual Information Description	File Name	
Primary Transmitter Installation	Component Description: Amount:	R0018595501 4- 50 TO 3-50 SINGLE CHANNEL \$1,749.18
	Component Description: Amount:	7/8" CELLFLEX Low-loss foam dielectric coaxial cable \$2,384.56
anti-freeze	Information not provided.	
Other Electrical Service: additional breakers in panel, EMT or flexible metal conduit, misc wiring	Information not provided.	
transmission line	Information not provided.	

UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	Component Description: Amount:	SYSTEM, PRLX U16 \$321,154.30
	Component Description: Amount:	SYSTEM, PRLX U16 \$45,879.18
	Component Description: Amount:	SYSTEM, PRLX U16 \$550,550.24

Antennas

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Interim Antenna 75010402	\$33,030.00	\$9,472.96		\$9,472.96	
UHF - Lower Power Side Mount, Class A One Station antenna basic	\$26,300.00	\$9,472.96	Please see DTVPros quote JEHQ1743 plus shipping costs on DTVPros invoice 405	\$9,472.96	N/A
Sweep test of existing antenna	\$6,730.00	\$0.00	Will be increased to correct budget when documentation is available	N/A	N/A
Primary Antenna TFU-24DSC- R C200	\$186,221.20	\$185,891.20		\$180,763.20	

Sweep test of existing antenna	\$6,730.00	\$6,400.00	Please note that the sweep test is not for the existing antenna, but instead for the new antenna (see line 24 of the attached antenna quote). The Form 399 question only asks whether a sweep test is needed; the description then adds "existing antenna"	\$5,760.00	N/A
UHF - High Power, Side Mount, basic slot antenna, 793 kW input, directional,, horizontally polarized	\$179,491.20	\$179,491.20	N/A	\$175,003.20	N/A
Sub-total	\$219,251.20	\$195,364.16	N/A	\$190,236.16	N/A
Total for all systems	\$1,709,961.94	\$1,645,550.49	N/A	\$1,334,403.32	N/A

Actual Information	
Description	File Name

UHF - Lower Power Side Mount, Class A One Station antenna basic	Component Description:	UHF - LOW POWER SIDE
		MOUNT
	Amount:	\$9,472.96
Sweep test of existing antenna	Information not provided.	
Sweep test of existing		
antenna	Component Description:	WGNM-210-
		Primary Antenna
		- Sweep Test
	Amount:	\$2,880.00
	Component Description:	WGNM-210-
		Primary Antenna
		- Sweep Test
	Amount:	\$2,880.00
JHF - High Power, Side		
Mount, basic slot antenna,	Component Description:	UHF - HIGH
793 kW input, directional,,		POWER SIDE
norizontally polarized		MOUNT
	Amount:	\$87,501.60
	Component Description:	UHF - HIGH
		POWER MOUNT
		I OWER MOONT

Transmission Line

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmission Line	\$145,440.00	\$121,976.35		\$103,219.52	
Rigid Transmission Line - copper, 6 1/8"	\$145,440.00	\$121,976.35	N/A	\$103,219.52	N/A
Sub-total	\$145,440.00	\$121,976.35	N/A	\$103,219.52	N/A
Total for all systems	\$1,709,961.94	\$1,645,550.49	N/A	\$1,334,403.32	N/A

Actual Information Description	File Name	
Rigid Transmission Line - copper, 6 1/8"	Component Description:	WGNM-310- Primary Transmission Line - Rigid Copper, 6 1 /8"
	Amount:	\$51,609.76
	Component Description:	WGNM-310- Primary Transmission Line - Rigid Copper, 6 1 /8"
	Amount:	\$51,609.76

Tower Equipment and Rigging Costs

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower TOWER	\$210,500.00	\$219,575.50		\$73,191.83	
Tall Tower (greater than 500')	\$210,500.00	\$219,575.50	see Estimated Cost Justification WGNM- 410- Existing Primary Tower - Tower Rigging, Tall Tower (_ 500') v0	\$73,191.83	N/A
Sub-total	\$210,500.00	\$219,575.50	N/A	\$73,191.83	N/A
Total for all systems	\$1,709,961.94	\$1,645,550.49	N/A	\$1,334,403.32	N/A

Actual Information Description	File Name	
Tall Tower (greater than 500')		
	Component Description:	1/3 Deposit due with signed quoted & PO
	Amount:	\$73,191.83

Outside Professional Services

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$126,792.00	\$130,627.00		\$46,038.35	
Attorney - Other Matters	\$702.00	\$702.00	Please see WGNM Justification Outside Professional Services- Attorney- Other Matters	\$702.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$550.00	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	\$0.00	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

Additional Field Engineering Service, 2 Days	\$4,000.00	\$4,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	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	\$562.50	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$808.00	N/A
Project management of the transition	\$94,010.00	\$99,675.00	Justifying Quote - WGNM Strategic support quote	\$41,415.85	N/A

Total for all	\$1,709,961.94	\$1,645,550.49	N/A	\$1,334,403.32	N/A
systems					

Actual Information Description	File Name	
Attorney - Other Matters	Component Description:	Attempt to complete WGNM quarterly transition
	Amount:	report \$78.00
	Component Description:	WGNM-550- Attorney - Other
	Amount:	Matters \$468.00
	Component Description:	WGNM-550- Attorney - Other Matters
	Amount:	\$156.00

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	Load and prepare initial draft Form 2100 for repacked channel construction permit application. \$80.00
	Component Description:	WGNM-550- Attorney - Construction Permit Application (Main) to process line item 5/15/17
	Amount:	\$80.00
	Component Description:	Review, modify and finalize Form 2100 CP application for WGNM
	Amount:	\$390.00
Prepare request for Special Temporary Authorization	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Additional Field Engineering Service, 2 Days	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.	

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description:	WGNM-530-RF Eng - Construction Permit Application
	Amount:	(Main) \$2,000.00
Perform engineering study for new channel assignment and antenna development	Component Description:	1. Engineering study work for new channel assignment and antenna
	Amount:	development. \$250.00
	Component Description:	Engineering study work for new channel assignment and antenna development.
	Amount:	\$312.50
Prepare and or review reimbursement form	Component Description:	Draft Form 399 on LMS.
	Amount:	\$80.00
	Component Description:	Review FCC request to associate username with
	Amount:	WGNM FRN \$468.00
	Component Description:	Review notice of WGNM repack CP
	Amount:	grant \$260.00
Project management of the		

transition

Component Description:

Amount:

Project Management \$2,351.60

Project

Management

\$2,643.80

Project

Project Management \$1,407.05

Management

\$1,231.60

Component Description:

Amount:

Component Description:

Amount:

Component Description:

Amount:

Component Description:

Project Management \$2,696.10

Component Description:

Amount:

Amount:

Component Description:

Component Description:

Amount:

Amount:

Project Management \$4,142.70

Project

Management

\$1,803.40

Project Management \$91.50

Component Description:

Project Management \$2,220.40

Amount:

Component Description: Amount:	Project Management \$3,061.40
Component Description: Amount:	Project Management \$1,564.60
Component Description: Amount:	Project Management \$1,023.10
Component Description: Amount:	Project Management \$2,129.55
Component Description: Amount:	Project Management \$1,508.10
Component Description: Amount:	Project Management \$2,226.55
Component Description: Amount:	Project Management \$1,682.70
Component Description: Amount:	Project Management \$1,575.90
Component Description: Amount:	Project Management \$1,505.60

Component Description: Amount:	Project Management \$1,607.40
Component Description: Amount:	Project Management \$2,161.40
Component Description: Amount:	Project Management \$1,660.70
Component Description:	Project Management \$1,120.70

Other Expenses

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Other Expenses	\$44,645.00	\$44,090.00		\$0.00	
Disposal Costs (for equipment and other waste, net of any salvage value)	\$6,000.00	\$6,000.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
MVPD Notification of Channel Change	\$1,500.00	\$1,500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$400.00	\$400.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Sub-total	\$44,645.00	\$44,090.00	N/A	\$0.00	N/A
Total for all systems	\$1,709,961.94	\$1,645,550.49	N/A	\$1,334,403.32	N/A

Components

Information not provided.

Cost Information	Grand Total				
		Predetermined Cost Estimate	Estimated Cost	Actual Cost	
	Total for all systems	\$1,709,961.94	\$1,645,550.49	\$1,334,403.32	

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

Certification	Section	Question	Response
	Submission of Estimated Expenses Statements	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.	
		 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).
- 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.	
an au name	are, under penalty of perjury, that I am thorized representative of the above- d applicant for the Authorization(s) ied above.	CHRIS L MAVROS D.E., Christian Television Network

Certification	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).	
		 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.	CHRIS L MAVROS D.E., Christian Television Network

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

3. The above-named entity certifies that all costs identified as "actual costs" herein accurately represent the costs actually paid by the above- named entity, including any discounts, refunds, or rebates.	
4. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.	
5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.	
6. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.	
I declare, under penalty of perjury, that I am an authorized representative of the above- named applicant for the Authorization(s) specified above.	CHRIS L MAVROS D.E., Christian Television Network
	06/29/2020

Attachments