



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **191262** | Service: **DCA** | Call **WMJF-CD** | Channel:  
ID: | Sign:  
**23 (UHF)** | File **0000028675**  
Number:  
FRN: **0022314215** | Date **07/16**  
Submitted: **/2020**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>HME EQUITY FUND II, LLC</b> Doing Business As: HME EQUITY FUND II, LLC	Seth Ellis 509 West Colonial Drive Suite 100 ORLANDO, FL 32804 United States	+1 (407) 906- 2484	sellis@assurancemezz. com	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
<b>Davina Sashkin</b> <i>Fletcher, Heald &amp; Hildreth, PLC</i>	Davina Sashkin Fletcher, Heald & Hildreth, PLC 1300 N. 17th Street, Suite 1100 Arlington, VA 22209 United States	+1 (703) 812- 0400	sashkin@fhhlaw. com

**Broadcaster  
Information  
and  
Transition  
Plan**

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	No
Briefly describe transition plan	Build according to FCC transition plan.

**Transmitters**

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

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	TMU9-570
	Year	2013
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	.6 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	TMU9-4 Evo
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1.5 kW
	Justification for New Transmitter	Can't use current Transmitter so need to purchase a new one, need more power per construction permit approved by FCC

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	Yes
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	3 inches

	Length	100.0 feet
	Other Electrical Service	Yes
	Description	Will need some electrical work to get it up and running, will submit quote from an electrician.
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	Yes
	Type	Cooling Only
	Size	Other
	Other Size	2 tons
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

**Primary Transmitter**      **Other Transmitter Cost Not Listed**

Name	Description
<b>Installation</b>	Cost to Install Transmitter Transmitter Install Quote # 101
<b>Removal</b>	Cost to just remove the transmitter from building Transmitter Removal Quote # 102

**Antennas**

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

## Primary Antenna

### Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Class	Class A
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	5.0 kW

Manufacturer	
Model	PSILP8BH-39
Year	2014



Primary  
Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna Manufacturer and Types	Class	Class A
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	15.0 kW
	Manufacturer	

Model	TLP-8VP-R P300-SP
Year	2020
Justification for New Antenna	Higher power antenna is necessary for modification application parameters (filed in 1st priority window).

## Primary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	
	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
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	Yes
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No

<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes
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**Primary  
Antenna**

**Other Antenna Cost Not Listed**

<b>Name</b>	<b>Description</b>
<b>Labor to install Antenna and Disposal Cost</b>	Labor to install Antenna and then remove the old one. This will include travel.
<b>Pipe and Mounting Pieces</b>	Materials and Labor to fabricate custom tower leg transition mounts. Mounts needed to hold a 3 and a half inch OD pipe off the angle tower leg

**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
<b>Existing Transmission Line Description</b>	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
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Flexible Foam
	Diameter	7/8 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	250 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?	Yes
	Type	Flexible Foam
	Diameter	7/8 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	250 feet per run
	Justification for New Transmission Line	Sweep test results will determine need.

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	Leased
	Is this tower consider Complex?	Located on Building
	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?	Yes
	Is tower compliant with Rev G?	Yes
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1037283
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	39° 24' 10.4" N-
	Longitude (NAD83)	076° 36' 10.9" W-
	Overall Structure Height	279.85 feet
	Support Structure Height	189.96 feet

	Ground Elevation Above Mean Sea Level (AMSL)	477.03 feet
	Structure Type	BTWR - Building with Tower
	Tower Owner	Towson City Center, LLC
	Date Constructed	06/25/2013

**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:	No reinforcements needed

**Primary Tower**

**Tower Rigging Costs**

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

**Primary Tower**

**Other Tower Expenses Not Listed**

Information not provided.



**Outside  
Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	600
	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.
<b>Outside RF consulting Engineering Services</b>	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
<b>Attorney and Other Outside Consulting Services</b>	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	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	No
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Other Transition- Related Professional Service Costs	Project Management of the transition. Preparation and review of reimbursement form.
Quarterly Transition Reports	Quarterly Transition Reports

## Other Expenses

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	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
<b>Permit and Filing Costs</b>	Local Zoning	Yes
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	No
	FCC Special Temporary Authority Application	No
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

**Other  
Expenses**

**Other Expenses Not Listed**

Name	Description
Other Miscellaneous Expenses	Other Miscellaneous Expenses

## 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
<b>Primary Transmitter TMU9-4 Evo</b>	<b>\$164,050.00</b>	<b>\$91,070.00</b>		<b>\$48,618.00</b>	
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$13,700.00	N/A	N/A	N/A
Other -- HVAC Service Type: C Size:2 (Other)	<i>\$2,000.00</i>	\$2,000.00	No quote yet but Licensee is going with a wall unit instead.	N/A	N/A
Other Electrical Service: Will need some electrical work to get it up and running, will submit quote from an electrician.	<i>\$1,500.00</i>	\$1,500.00	Waiting on Quotes to submit	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$4,900.00	N/A	N/A	N/A

Removal	<b>\$3,000.00</b>	\$3,000.00	Removal only of old Transmitter. Transmitter Removal Quote 102 attached.	N/A	N/A
Installation	<b>\$11,950.00</b>	\$11,950.00	Cost to install the new transmitter Transmitter Install Quote 101 attached.	N/A	N/A
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$54,020.00	Please see document entitled " Updated Narrative for Transmitter Change WMJF- CD" for the cost justification and the quotes as supporting documentation. This amount is only for the transmitter itself. Per Geoffrey put the other costs in separate lines.	\$48,618.00	N/A
<b>Sub-total</b>	\$164,050.00	\$91,070.00	N/A	\$48,618.00	N/A
<b>Total for all systems</b>	\$824,340.00	\$510,573.00	N/A	\$156,495.33	N/A

## Components

Actual Information	
Description	File Name
Service entrance 3 phase /800 amp/208 volt	Information not provided.

Other -- HVAC Service Type: C Size:2 (Other)	Information not provided.
Other Electrical Service: Will need some electrical work to get it up and running, will submit quote from an electrician.	Information not provided.
3" Rigid Conduit and Wiring (Cost per foot)	Information not provided.
Removal	Information not provided.
Installation	Information not provided.
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	<div> <div> <b>Component Description:</b> </div> <div> This is the first of 3 invoices for the transmitter. There is a cover letter attached to the invoice to explain reimbursement. Quote # 276446.0 has already been submitted with transmitter change narrative. </div> </div> <div> <div> <b>Amount:</b> </div> <div> \$16,206.00 </div> </div> <div> <div> <b>Component Description:</b> </div> <div> Requesting amount of invoice less prorated portion of upgrade. Invoice has cover letter attached explaining the reimbursement amount. </div> </div> <div> <div> <b>Amount:</b> </div> <div> \$32,412.00 </div> </div>



## 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
<b>Primary Antenna TLP-8VP-R P300-SP</b>	<b>\$51,080.00</b>	<b>\$72,950.00</b>		<b>\$57,720.42</b>	
Pipe and Mounting Pieces	<i>\$3,050.00</i>	\$3,050.00	See Narrative	\$3,050.00	N/A
Labor to install Antenna and Disposal Cost	<i>\$15,000.00</i>	\$15,000.00	See attached narrative	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	Quote for this was originally provided in 2017 and since then prices have gone up and the new standard for a sweep test is \$6400 and this is still below the predetermined amount. See line #6 on quote # 900237CMZ-2 from Dielectric	\$6,400.00	N/A

UHF - Lower Power Side Mount, Class A One Station antenna -- basic	\$26,300.00	\$48,500.00	See document entitled "Narrative for Antenna Estimate Change WMJF-CD" for cost justification and details on corresponding quotes.	\$48,270.42	N/A
<b>Sub-total</b>	\$51,080.00	\$72,950.00	N/A	\$57,720.42	N/A
<b>Total for all systems</b>	\$824,340.00	\$510,573.00	N/A	\$156,495.33	N/A

## Components

Actual Information	
Description	File Name
Pipe and Mounting Pieces	<p><b>Component Description:</b> Custom mounts, plates, bolts and piping to mount the Antenna legs</p> <p><b>Amount:</b> \$3,050.00</p>
Labor to install Antenna and Disposal Cost	Information not provided.

Sweep test of existing antenna

**Component Description:**

Requesting just 1/2 of the sweep test on this invoice for this category.

Please see narrative attached to invoice from vendor stating why their invoices don't foot and that the FCC is fine with their billing process

**Amount:**

\$3,200.00

**Component Description:**

Requesting just 1/2 of the sweep test on this invoice for this category.

Please see narrative attached to invoice from vendor stating why their invoices don't foot and that the FCC is fine with their billing process

**Amount:**

\$3,200.00

UHF - Lower Power Side  
Mount, Class A One  
Station antenna -- basic

**Component Description:**

Sales tax on  
Antenna at 6  
percent, requesting  
less because the  
Vpol is not  
reimbursable.  
Sales tax not  
reimbursable  
\$219.36 (3656 x .  
06) See attached  
Cover Letter

**Amount:**

\$2,590.92

**Component Description:**

See Attached  
narrative entitled  
"Narrative on why  
we are requesting  
less  
reimbursement on  
the Dielectric  
Invoices"

**Amount:**

\$21,591.00

**Component Description:**

See Attached  
narrative entitled  
"Narrative on why  
we are requesting  
less  
reimbursement on  
the Dielectric  
Invoices"

**Amount:**

\$21,591.00

**Component Description:**

Freight charge for  
delivering the  
antenna.

**Amount:**

\$2,497.50

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	\$2,750.00	\$4,000.00		\$0.00	
Flexible Foam Transmission Line - dielectric, 7/8"	\$2,750.00	\$4,000.00	N/A	N/A	N/A
Sub-total	\$2,750.00	\$4,000.00	N/A	\$0.00	N/A
Total for all systems	\$824,340.00	\$510,573.00	N/A	\$156,495.33	N/A

Components

Information not provided.

## Cost Information

### Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Tower BTWR</b>	<b>\$433,600.00</b>	<b>\$162,000.00</b>		<b>\$0.00</b>	
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$150,000.00	Crane required to install antenna, transmitter and HVAC. Phone quote min \$50,000 per day for crane rental and crew, and assuming 2 non-contiguous days (only able to shut down street /building on Sundays). Additional \$50,000 sought to cover tower crew.	N/A	N/A
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$433,600.00</b>	<b>\$162,000.00</b>	N/A	<b>\$0.00</b>	N/A

<b>Total for all systems</b>	\$824,340.00	\$510,573.00	N/A	\$156,495.33	N/A
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### Components

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
<b>Outside Professional Services</b>	<b>\$132,310.00</b>	<b>\$141,200.00</b>		<b>\$39,803.91</b>	
Other Transition-Related Professional Service Costs	<i>\$2,500.00</i>	\$2,500.00	Prepare and/or review reimbursement form	\$0.00	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	\$1,298.13	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	\$2,625.00	The actual hours for the engineering studies came in little higher than original estimate
Prepare and or review reimbursement form	\$2,630.00	\$6,500.00	Originally when the estimate was put in was put in based off of what the cost catalog had as that was the best estimate at the time. As they went thru to complete the form there were a lot of revisions for transmitter&antenna costs that got revised	\$6,496.62	N/A
Quarterly Transition Reports	<b>\$8,450.00</b>	\$8,450.00	see attached quote for preparation and filing of reports by counsel and technical consultant	\$1,502.50	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$15,000.00	Attorneys fees for negotiation of Unable to Construct Channel Resolution Agreement with WETA and MPT, preparation and filing and related CP modification and updated 399.	\$5,338.00	N/A

Project management of the transition	\$94,800.00	\$90,000.00	Project management expenses.	\$20,543.66	N/A
<b>Sub-total</b>	\$132,310.00	\$141,200.00	N/A	\$39,803.91	N/A
<b>Total for all systems</b>	\$824,340.00	\$510,573.00	N/A	\$156,495.33	N/A

## Components

Actual Information	
Description	File Name
Other Transition- Related Professional Service Costs	<p><b>Component Description:</b> Entered in this section in error</p> <p><b>Amount:</b> N/A</p>
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	<p><b>Component Description:</b> Attorney fees for preparing and filing FCC Form 2100 (main), construction permit application for WMJF-CD for the Baltimore station. The fees are all the ones denoted with the letter D next to them.</p> <p><b>Amount:</b> \$1,298.13</p>
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.

<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="707 174 1015 208"><b>Component Description:</b></td><td data-bbox="1150 174 1374 365">Engineering work to complete the construction permit application section of form 2100</td></tr> <tr> <td data-bbox="707 376 815 409"><b>Amount:</b></td><td data-bbox="1150 376 1267 409">\$2,000.00</td></tr> </table>	<b>Component Description:</b>	Engineering work to complete the construction permit application section of form 2100	<b>Amount:</b>	\$2,000.00												
<b>Component Description:</b>	Engineering work to complete the construction permit application section of form 2100																
<b>Amount:</b>	\$2,000.00																
<p>Perform engineering study for new channel assignment and antenna development</p>	<table> <tr> <td data-bbox="707 548 1015 582"><b>Component Description:</b></td><td data-bbox="1150 548 1374 896">Engineering study on new channel assignment and antenna development No longer over amount allocated other vendor on hold for clarification</td></tr> <tr> <td data-bbox="707 907 815 940"><b>Amount:</b></td><td data-bbox="1150 907 1267 940">\$2,125.00</td></tr> <tr> <td data-bbox="707 1046 1015 1079"><b>Component Description:</b></td><td data-bbox="1150 1046 1350 1276">Removing for the time being need clarification from vendor and don't want to hold up other expenses</td></tr> <tr> <td data-bbox="707 1288 815 1321"><b>Amount:</b></td><td data-bbox="1150 1288 1193 1321">N/A</td></tr> <tr> <td data-bbox="707 1426 1015 1460"><b>Component Description:</b></td><td data-bbox="1150 1426 1350 1657">Removing for the time being need clarification from vendor and don't want to hold up other expenses</td></tr> <tr> <td data-bbox="707 1668 815 1702"><b>Amount:</b></td><td data-bbox="1150 1668 1193 1702">N/A</td></tr> <tr> <td data-bbox="707 1807 1015 1841"><b>Component Description:</b></td><td data-bbox="1150 1807 1350 2038">Removing for the time being need clarification from vendor and don't want to hold up other expenses</td></tr> <tr> <td data-bbox="707 2049 815 2083"><b>Amount:</b></td><td data-bbox="1150 2049 1193 2083">N/A</td></tr> </table>	<b>Component Description:</b>	Engineering study on new channel assignment and antenna development No longer over amount allocated other vendor on hold for clarification	<b>Amount:</b>	\$2,125.00	<b>Component Description:</b>	Removing for the time being need clarification from vendor and don't want to hold up other expenses	<b>Amount:</b>	N/A	<b>Component Description:</b>	Removing for the time being need clarification from vendor and don't want to hold up other expenses	<b>Amount:</b>	N/A	<b>Component Description:</b>	Removing for the time being need clarification from vendor and don't want to hold up other expenses	<b>Amount:</b>	N/A
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<b>Amount:</b>	\$2,125.00																
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<b>Amount:</b>	N/A																

	<table> <tr> <td data-bbox="708 98 1107 383"><b>Component Description:</b></td><td data-bbox="1107 98 1426 383">Removing for the time being need clarification from vendor and don't want to hold up other expenses</td></tr> <tr> <td data-bbox="708 383 1107 472"><b>Amount:</b></td><td data-bbox="1107 383 1426 472">N/A</td></tr> <tr> <td data-bbox="708 472 1107 891"><b>Component Description:</b></td><td data-bbox="1107 472 1426 891">Engineering work on new channel assignment and antenna development. No longer over amount allocated other vendor on hold for clarification</td></tr> <tr> <td data-bbox="708 891 1107 987"><b>Amount:</b></td><td data-bbox="1107 891 1426 987">\$500.00</td></tr> </table>	<b>Component Description:</b>	Removing for the time being need clarification from vendor and don't want to hold up other expenses	<b>Amount:</b>	N/A	<b>Component Description:</b>	Engineering work on new channel assignment and antenna development. No longer over amount allocated other vendor on hold for clarification	<b>Amount:</b>	\$500.00
<b>Component Description:</b>	Removing for the time being need clarification from vendor and don't want to hold up other expenses								
<b>Amount:</b>	N/A								
<b>Component Description:</b>	Engineering work on new channel assignment and antenna development. No longer over amount allocated other vendor on hold for clarification								
<b>Amount:</b>	\$500.00								
Prepare and or review reimbursement form	<table> <tr> <td data-bbox="708 987 1107 1615"><b>Component Description:</b></td><td data-bbox="1107 987 1426 1615">Form 399 Fees are all the ones w/the letter E. This cost is more than the form has but there was not enough info to put an amount other than the one in the cost catalog. The detailed invoice has all the break out on what all the time was spent on.</td></tr> <tr> <td data-bbox="708 1615 1107 1713"><b>Amount:</b></td><td data-bbox="1107 1615 1426 1713">\$6,496.62</td></tr> </table>	<b>Component Description:</b>	Form 399 Fees are all the ones w/the letter E. This cost is more than the form has but there was not enough info to put an amount other than the one in the cost catalog. The detailed invoice has all the break out on what all the time was spent on.	<b>Amount:</b>	\$6,496.62				
<b>Component Description:</b>	Form 399 Fees are all the ones w/the letter E. This cost is more than the form has but there was not enough info to put an amount other than the one in the cost catalog. The detailed invoice has all the break out on what all the time was spent on.								
<b>Amount:</b>	\$6,496.62								

Quarterly Transition Reports	<table> <tr> <td data-bbox="708 174 1015 208"><b>Component Description:</b></td><td data-bbox="1150 174 1374 286">Attorney Fees for preparing quarterly transition reports.</td></tr> <tr> <td data-bbox="708 297 815 331"><b>Amount:</b></td><td data-bbox="1150 297 1267 331">\$1,027.50</td></tr> <tr> <td data-bbox="708 432 1015 465"><b>Component Description:</b></td><td data-bbox="1150 432 1374 824">Attorney fees for preparing quarterly transition reports for WMJF-CD for the Baltimore station. The fees are all the ones denoted with the letter A next to them.</td></tr> <tr> <td data-bbox="708 835 815 869"><b>Amount:</b></td><td data-bbox="1150 835 1246 869">\$475.00</td></tr> <tr> <td data-bbox="708 969 1015 1003"><b>Component Description:</b></td><td data-bbox="1150 969 1342 1081">Quarterly Transition report work.</td></tr> <tr> <td data-bbox="708 1093 815 1126"><b>Amount:</b></td><td data-bbox="1150 1093 1267 1126">\$1,027.50</td></tr> </table>	<b>Component Description:</b>	Attorney Fees for preparing quarterly transition reports.	<b>Amount:</b>	\$1,027.50	<b>Component Description:</b>	Attorney fees for preparing quarterly transition reports for WMJF-CD for the Baltimore station. The fees are all the ones denoted with the letter A next to them.	<b>Amount:</b>	\$475.00	<b>Component Description:</b>	Quarterly Transition report work.	<b>Amount:</b>	\$1,027.50
<b>Component Description:</b>	Attorney Fees for preparing quarterly transition reports.												
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<b>Amount:</b>	\$475.00												
<b>Component Description:</b>	Quarterly Transition report work.												
<b>Amount:</b>	\$1,027.50												
Attorney Fees - Negotiation of lease and other matters for shared locations	<table> <tr> <td data-bbox="708 1261 1015 1294"><b>Component Description:</b></td><td data-bbox="1150 1261 1374 1608">Various Attorney fees for other matters for WMJF-CD for the Baltimore station. The fees are all the ones denoted with the letter B next to them.</td></tr> <tr> <td data-bbox="708 1619 815 1653"><b>Amount:</b></td><td data-bbox="1150 1619 1267 1653">\$5,338.00</td></tr> </table>	<b>Component Description:</b>	Various Attorney fees for other matters for WMJF-CD for the Baltimore station. The fees are all the ones denoted with the letter B next to them.	<b>Amount:</b>	\$5,338.00								
<b>Component Description:</b>	Various Attorney fees for other matters for WMJF-CD for the Baltimore station. The fees are all the ones denoted with the letter B next to them.												
<b>Amount:</b>	\$5,338.00												
Project management of the transition													

<b>Component Description:</b>	Project Management Services. Invoice has been revised to include an invoice # and project manager name. Narrative is also attached.
<b>Amount:</b>	\$3,293.66

<b>Component Description:</b>	Project Management services, invoice has been revised to include the needed items. Deducting the Smith and Fischer part from this reimbursement for now. As requested a narrative is attached to this invoice.
<b>Amount:</b>	\$15,750.00

<b>Component Description:</b>	Repack project management services - research and coordination with engineering, attorney's and vendors.
<b>Amount:</b>	\$1,500.00

<b>Component Description:</b>	Transition Project Management services, receipts for expenses attached to invoice. This company does not use invoice #'s so just did a description.
<b>Amount:</b>	\$18,150.00

<b>Component Description:</b>	Project management services. A narrative letter is attached explaining the breakout of the invoice. Expense receipts are attached to the invoice. Also this company does not use specific invoice numbers so I just did a description
<b>Amount:</b>	\$3,293.66

## 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
<b>Other Expenses</b>	<b>\$40,550.00</b>	<b>\$39,353.00</b>		<b>\$10,353.00</b>	
Equipment Storage	<i>\$2,500.00</i>	\$2,500.00	N/A	N/A	N/A
Non-zoning permits	<i>\$2,000.00</i>	\$2,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$10,353.00	Adjusting cost to the current market rate for this service, original amount was put in over 2 years ago. Attached is INV-002398 & EST-001750	\$10,353.00	N/A
Develop and air announcement of upcoming channel change	<i>\$2,500.00</i>	\$2,500.00	N/A	N/A	N/A
Local Zoning	<i>\$2,000.00</i>	\$2,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A



Disposal Costs (for equipment and other waste, net of any salvage value)	\$5,000.00	\$5,000.00	N/A	N/A	N/A
MVPD Notification of Channel Change	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Other Miscellaneous Expenses	\$5,000.00	\$5,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$40,550.00	\$39,353.00	N/A	\$10,353.00	N/A
<b>Total for all systems</b>	\$824,340.00	\$510,573.00	N/A	\$156,495.33	N/A

## Components

Actual Information	
Description	File Name
Equipment Storage	Information not provided.
Non-zoning permits	Information not provided.
DTV Medical Facility Notification	<p><b>Component Description:</b> Service fee to do the Notification of Medical Facilities for Baltimore.</p> <p><b>Amount:</b> \$10,353.00</p>
Develop and air announcement of upcoming channel change	Information not provided.
Local Zoning	Information not provided.
Equipment Delivery and Handling Charges	Information not provided.
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.

MVPD Notification of Channel Change	Information not provided.
Other Miscellaneous Expenses	Information not provided.

<b>Cost Information</b>	<b>Grand Total</b>		
		<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>
			<b>Actual Cost</b>
	<b>Total for all systems</b>	\$824,340.00	\$510,573.00
			\$156,495.33

<b>Reimbursement Status</b>	<b>Question</b>	<b>Response</b>
	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
	Submission of Estimated Expenses Statements	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>	
		<ol style="list-style-type: none"> <li>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.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>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.</li> </ol>	

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

<p>8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Ann Olsen</b>  <i>Consultant</i>  07/16/2020</p>

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 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).	
		<ol style="list-style-type: none"> <li>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.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	

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



<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Ann Olsen</b> <i>Consultant</i></p> <p>07/16/2020</p>

## Attachments