



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **13995** | Service: **DTV** | Call **WLOX** | Channel: **32 (UHF)** |
ID:
File **0000024803**
Number:
FRN: **0018223693** | Date **08/04**
Submitted: **/2020**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
GRAY TELEVISION LICENSEE, LLC Doing Business As: GRAY TELEVISION LICENSEE, LLC	Robert Folliard 4370 PEACHTREE ROAD, NE ATLANTA, GA 30319 United States	+1 (404) 504-9828	robert.folliard@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
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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	Existing Ch 39 Transmitters, line and side mount antenna will serve as interim Station will install new top mounted antenna and line. Station will install new main and backup transmitters

Transmitters

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

Auxiliary Transmitter

Add Transmitter Information

Section	Question	Response
Existing Transmitter Description	Type of change	Retune Existing
	Use	Auxiliary (Backup)
	Ownership	Owned
	Owner	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	Harris
	Model	UAXT-1000
	Year	2012

	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1.1 kW

**Auxiliary
Transmitter**

Retuning Transmitter Costs

Section	Question	Response
New IOT Tubes	Number of Tubes (including accessories) needed	N/A
New Mask Filter	Power	3 kW
	Other Power	N/A
New Exciter	Is a new exciter needed?	No

**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	Sigma
	Year	2003
	Type	Inductive Output Tube
	IOT Power Type	Single
	Power Capacity	30.2 kW

**Primary
Transmitter**

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	ULXTE-50
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	31.7 kW
	Justification for New Transmitter	Existing transmitter cannot be retuned Manufacturers letter attached 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

**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	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)	715.0 kW

Manufacturer	
Model	ATW25H3- HSWC-39H
Year	2003

**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	Full Power
	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)	550.0 kW
	Manufacturer	

Model	TFU-27ETT /VP-R C140
Year	2019
Justification for New Antenna	Existing Ch 39 antenna can not be retuned. Reduced ERP to allow for top mounting. E-Pol premium not reimbursable. Top mount premium less expensive than interim antenna.

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	6 1/8 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1220 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	1300 feet per run
	Justification for New Transmission Line	Existing line will be used as interim, while new line is installed to the new antenna. Existing line is mismatched on Ch-32 Sweep data attached

Primary
Transmission Line

Other Transmission Line Expenses Not Listed

Name	Description
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Installation Materials	Tarps to cover line in site Pressurization parts
Nitrogen	TX Line pressurization

**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?	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?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1039874
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	30° 43' 23.0" N-
	Longitude (NAD83)	089° 05' 28.0" W-
	Overall Structure Height	1319.21 feet
	Support Structure Height	1203.40 feet
	Ground Elevation Above Mean Sea Level (AMSL)	229.98 feet

Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	WLOX, LLC
Date Constructed	04/17/2017

Primary Tower

Tower Modification Costs

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

Primary Tower

Tower Rigging Costs

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

Primary Tower

Other Tower Expenses Not Listed

Name	Description
Tower Load Study	Structural Analysis

**Outside
Professional Services Costs**

Section	Question	Response
Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	607
	Explanation	Pattern analysis Antenna Spec Transmitter Spec Building drawings Installation Supervision Accounting Internal Legal Strategic Support
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A

Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	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	Yes
	Number of Days	1
	Justification	System sweep

Outside Other Professional Services Expenses Not Listed
Professional Services Costs Services 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

Name	Description
Security	Site Security to prevent copper theft

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-50	\$1,042,656.94	\$1,038,956.94		\$591,316.17	
UHF - Liquid Cooled Solid State Transmitter 31.7 kW	<i>\$967,656.94</i>	\$967,656.94	Please see attached GatesAir Quote GA-00021475, Change Order Q-73747, and email from Bob Thurber confirming WLOX's Transmitter Model	\$570,931.92	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	\$0.00	N/A
Transformer 3 phase /480v - 300 KVA	\$36,800.00	\$35,000.00	N/A	\$20,384.25	N/A
Auxiliary Transmitter UAXT-1000	\$109,355.00	\$13,594.72		\$13,594.71	
3 kW mask filter	\$4,155.00	\$0.00	included in tx quote	\$0.00	N/A

UHF and VHF - minor banding issues	\$105,200.00	\$13,594.72	see Estimated Cost Justification WLOX-150-1st Auxiliary Transmitter - Retune Existing Transmitter, Minor Banding Issues v0	\$13,594.71	N/A
Sub-total	\$1,152,011.94	\$1,052,551.66	N/A	\$604,910.88	N/A
Total for all systems	\$2,376,007.27	\$2,190,105.11	N/A	\$1,429,447.74	N/A

Components

Actual Information	
Description	File Name
UHF - Liquid Cooled Solid State Transmitter 31.7 kW	<p>Component Description: ULXTE-50 Amount: \$145,148.51</p> <p>Component Description: ULXTE-50 Amount: \$322,522.27</p> <p>Component Description: ULXTE-50 Amount: \$97,791.30</p> <p>Component Description: Hook up transmitter and equipment Amount: \$5,469.84</p>
Switchgear - industrial 800 amp	Information not provided.

Transformer 3 phase/480v - 300 KVA	<div> Component Description: Work completed at McHenry from 1 /29/18-4/28/18 </div> <div> Amount: \$20,384.25 </div>
3 kW mask filter	Information not provided.
UHF and VHF - minor banding issues	<div> Component Description: Channel Change UAX-1000AT </div> <div> Amount: \$10,809.31 </div> <div> Component Description: Channel Change UAX-1000AT </div> <div> Amount: \$1,114.16 </div> <div> Component Description: Channel Change and Proof </div> <div> Amount: \$1,671.24 </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
Primary Antenna TFU-27ETT /VP-R C140	\$296,230.00	\$281,579.56		\$268,500.25	
Sweep test of existing antenna	\$6,730.00	\$9,022.06	Per Dielectric quote 45168 (\$6,400.00) and Marsand quote 1964 (\$3,400 plus \$234.00 tax). All quotes resident in LMS. See "WLOX_Sweep Test_Budget Increase Justification Cover Letter".	\$9,022.06	Actual costs exceeded estimates
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$272,557.50	see Justifying Quote WLOX Dielectric Quote 45168	\$259,478.19	N/A
Sub-total	\$296,230.00	\$281,579.56	N/A	\$268,500.25	N/A
Total for all systems	\$2,376,007.27	\$2,190,105.11	N/A	\$1,429,447.74	N/A

Components

Actual Information	
Description	File Name
Sweep test of existing antenna	Component Description: Sweep Test
	Amount: \$640.00
	Component Description: Engineering services
	Amount: \$234.34
	Component Description: Sweep Test
	Amount: \$1,600.00
	Component Description: 50% Due
	Amount: \$3,200.00
	Component Description: Engineering services to measure antenna and line plus motel, meals, and mileage
	Amount: \$3,347.72

UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized		
	Component Description:	Antenna
	Amount:	\$63,302.62
	Component Description:	Antenna
	Amount:	\$25,321.05
	Component Description:	UHF - HIGH POWER TOP MOUNT (200 - 1,000 KW)
	Amount:	\$44,249.27
	Component Description:	50% Due prior to shipment
	Amount:	\$126,605.25

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	\$263,240.33	\$204,126.89		\$182,264.37	
Nitrogen	<i>\$227.64</i>	\$227.64	Documentation attached WLOX Airgas South	\$227.64	N/A
Installation Materials	<i>\$412.69</i>	\$412.69	Documentation attached (WLOX install materials)	N/A	N/A
Rigid Transmission Line - copper, 6 1/8"	\$262,600.00	\$203,486.56	see Estimated Cost Justification WLOX-310-Primary Transmission Line - Rigid Copper, 6 1_8 v0	\$182,036.73	N/A
Sub-total	\$263,240.33	\$204,126.89	N/A	\$182,264.37	N/A
Total for all systems	\$2,376,007.27	\$2,190,105.11	N/A	\$1,429,447.74	N/A

Components

Actual Information Description	File Name
Nitrogen	Component Description: Nitrogen Amount: \$227.64
Installation Materials	Information not provided.

Rigid Transmission Line -
copper, 6 1/8"

Component Description: Trans Line
Amount: \$42,474.78

Component Description: T L 6-75 EIA
LENGTH 10 TO
15FIXED FLG
Amount: \$1,011.73

Component Description: Trans Line
Amount: \$16,989.91

Component Description: XFMR 6-50 / 6-75
UHF 3 ST
Amount: \$1,279.00

Component Description: WLOX-310-
Primary
Transmission Line
- Rigid Copper, 6 1
/8"
Amount: \$24,282.11

Component Description: 50% Before
Shipment
Amount: \$84,949.55

Component Description: Elbow, reducer,
and fixed flg
Amount: \$11,049.65

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 GTOWER	\$405,800.00	\$401,650.00		\$295,450.00	
Tower Load Study	<i>\$11,000.00</i>	\$11,000.00	N/A	\$11,000.00	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$5,500.00	N/A	\$5,500.00	Previously submitted component to be denied
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	\$43,800.00	N/A
Tall Tower (greater than 500')	\$210,500.00	\$235,150.00	see Estimated Cost Justification WLOX-410- Existing Primary Tower - Tower Rigging, Tall Tower v0	\$235,150.00	Actual costs exceeded estimates
Sub-total	\$405,800.00	\$401,650.00	N/A	\$295,450.00	N/A
Total for all systems	\$2,376,007.27	\$2,190,105.11	N/A	\$1,429,447.74	N/A

Components

Actual Information	
Description	File Name
Tower Load Study	<p>Component Description: Structural analysis and report for WLOX-TV 1202' Stainless Steel G& Guyed Tower</p> <p>Amount: \$11,000.00</p>
Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study	<p>Component Description: Tower Service - Mapping of WLOX Facility ID # 13995</p> <p>Amount: \$5,500.00</p> <p>Component Description: Tower Mapping for WLOX's portion of the invoice</p> <p>Amount: \$5,500.00</p>
Minor tower reinforcement /modifications	<p>Component Description: Tower Modification</p> <p>Amount: \$21,900.00</p> <p>Component Description: 50% upon completion</p> <p>Amount: \$21,900.00</p> <p>Component Description: 50% Down Payment</p> <p>Amount: \$21,900.00</p>

Tall Tower (greater than 500')

Component Description:

Drill and pour pilings for ice bridge

Amount:

\$18,750.00

Component Description:

Final Invoice and balance of contract.

Amount:

\$149,000.00

Component Description:

Clearance of 100ft of the tag line path that leads to the transmitter tower

Amount:

\$2,400.00

Component Description:

Invoice Resubmitted in the same category.

Amount:

N/A

Component Description:

Down Payment

Amount:

\$65,000.00

Cost Information

Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$206,326.00	\$206,898.00		\$71,343.24	
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	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	\$119.63	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	\$3,125.00	N/A	\$3,125.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Project management of the transition	\$95,906.00	\$101,523.00	Widely Strategic Support Quote & THTV Estimate	\$68,098.61	N/A
Additional Field Engineering Service, 1 Days	\$6,500.00	\$6,500.00	system sweep	\$0.00	N/A
Sub-total	\$206,326.00	\$206,898.00	N/A	\$71,343.24	N/A
Total for all systems	\$2,376,007.27	\$2,190,105.11	N/A	\$1,429,447.74	N/A

Components

Actual Information	
Description	File Name
Comprehensive coverage verification via field study, if needed	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	<p>Component Description: Call with FCC staff regarding phase waiver request for WLOX. Repack.</p> <p>Amount: \$119.63</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: Engineering study work for new channel assignment and antenna development. Preparation of the engineering section of FCC Form 2100.</p> <p>Amount: \$1,750.00</p> <p>Component Description: Engineering study work for new channel assignment and antenna development</p> <p>Amount: \$125.00</p> <p>Component Description: Engineering study work for new channel assignment and antenna development</p> <p>Amount: \$1,250.00</p>
Perform engineering study for new channel assignment and antenna development	Information not provided.
Project management of the	

transition

Component Description:	Project Management
Amount:	\$3,210.75

Component Description:	Project Management
Amount:	\$2,364.40

Component Description:	Project Management
Amount:	\$2,435.15

Component Description:	Project Management
Amount:	\$3,675.35

Component Description:	Project Management
Amount:	\$3,919.75

Component Description:	Project Management
Amount:	\$2,011.95

Component Description:	Project Management
Amount:	\$2,722.55

Component Description:	Project Management
Amount:	\$4,348.25

Component Description:	Project Management
Amount:	\$125.76

Component Description:	Project Management
Amount:	\$4,714.70

Component Description:	Project Management
Amount:	\$4,012.50

Component Description:	Project Management
Amount:	\$115.50

Component Description:	Project Management
Amount:	\$3,693.70

Component Description:	Project Management
Amount:	\$5,483.15

Component Description:	Project Management
Amount:	\$2,246.70

Component Description:	Project Management
Amount:	\$3,190.90

Component Description:	Project Management
Amount:	\$3,401.20

Component Description:	Project Management
Amount:	\$2,303.35

	Component Description:	Project Management
	Amount:	\$2,179.80
	Component Description:	Project management
	Amount:	\$2,942.75
	Component Description:	Project Management
	Amount:	\$2,873.40
	Component Description:	Project Management
	Amount:	\$2,864.60
	Component Description:	Project Management
	Amount:	\$3,262.45
Additional Field Engineering Service, 1 Days	Information not provided.	

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	\$52,399.00	\$43,299.00		\$6,979.00	
Security	<i>\$4,529.00</i>	\$4,529.00	Site specific detail attached (Swetment Security Service)	\$4,529.00	N/A
Develop and air announcement of upcoming channel change	<i>\$2,850.00</i>	\$2,850.00	estimate for on air rescan announcement production Quote attached	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$2,450.00	Group quote attached	\$2,450.00	N/A
Equipment Storage	<i>\$30,500.00</i>	\$30,500.00	Estimate for Dielectric on site antenna storage Dielectric letter attached	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$2,970.00</i>	\$2,970.00	On site forklift rental estimate Representative quote attached	N/A	N/A
MVPD Notification of Channel Change	<i>\$0.00</i>	\$0.00	N/A	N/A	N/A
Sub-total	\$52,399.00	\$43,299.00	N/A	\$6,979.00	N/A
Total for all systems	\$2,376,007.27	\$2,190,105.11	N/A	\$1,429,447.74	N/A

Components

Actual Information Description	File Name
Security	<div> Component Description: Security Guard Services </div> <div> Amount: \$4,529.00 </div>
Develop and air announcement of upcoming channel change	Information not provided.
DTV Medical Facility Notification	<div> Component Description: Medical Notification </div> <div> Amount: \$2,450.00 </div>
Equipment Storage	Information not provided.
Equipment Delivery and Handling Charges	Information not provided.
MVPD Notification of Channel Change	Information not provided.

**Cost
Information**

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$2,376,007.27	\$2,190,105.11	\$1,429,447.74

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
	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"> 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.

<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>Robert Folliard , III . <i>Assistant Secretary</i></p> <p>08/04/2020</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"> 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.

<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>Robert Folliard , III . <i>Assistant Secretary</i></p> <p>08/04/2020</p>

Attachments