

Federal Communications Commission

## (REFERENCE COPY - Not for submission)

## FCC Form 399: Reimbursement Request

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Facility	60829	Service: DTV	Call	WMCF-TV	Channel: 28 (UHF)
ID:			Sign:		
File	00000	26541			
Number:					
FRN: 000	04346060	Date	08/05		
		Submitted:	/2020		

# Applicant Name, Type, and Contact Information

Information	Applicant	Address	Phone	Email	Applicant Type
	TRINITY BROADCASTING OF TEXAS, INC. Doing Business As: TRINITY BROADCASTING NETWORKS	13600 Heritage Parkway Suite 200 Fort Worth, TX 76177 United States	+1 (855) 826- 2255	CMMAY@MAYLAWOFFICES. COM	Not-for- Profit

#### Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer	Preparer Contact Name and Information						
Contact Information	Applicant	Address	Phone	Email			
	The Preparer is same as the reimbursement contact.						

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.	No
	Briefly describe transition plan	Reduce TPO to 50% and remove 1/2 of the xmitter system. Install new SS xmitter system. Add AUX antenna & line to the tower & feed it with a reduced signal from the current xmitter. Remove & replace antenna. Test.

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	DCX 2			
		Year	2006			
		Туре	Inductive Output Tube			
		IOT Power Type	Two			
		Power Capacity	50 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?	No			
		Manufacturer				
		Model	HPTV- PRLX-U24			
		Transmitter Type	Solid State			
		Solid State Cooling	Liquid Cooled			
		Solid State Power capacity	40 kW			
		Justification for New Transmitter	see attachment			

## Primary Other Transmitter Costs

Transmitter	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	Yes
		Size	2 inches
		Length	200.0 feet
		Other Electrical Service	Yes
		Description	disconnects, labor

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 Transmitter	Other Transmitter Cost Not Listed		
	Name	Description	
	install	xmitter installation	

Antennas Section		Question	Response
Antenna Rela	ated 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	
		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)	851.0 kW	

Manufacturer	
Model	ATW20H3- HSOX-46
Year	2005

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)	597.0 kW	
		Manufacturer		
			1	

Model	ATW20H3- HSOX-28H
Year	2017
Justification for New Antenna	Present antenna can NOT be re-tuned.

Primary Antenna	Other Antenna Costs			
	Section	Question	Response	
	Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?		
		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?	Yes	
		Broadband or Single Channel?	Single Channel	
		Feed Line Size	4 1/16 inches inches	
	Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	Yes	
	Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	Yes	
	Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes	

#### Other Antenna Costs

# Primary<br/>AntennaOther Antenna Cost Not ListedInformation 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	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)	250.0 kW	
		Manufacturer		
		Model	RD12 c170	
		Year	2017	
			1	

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?	Yes	
	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?	No	

#### Other Antenna Costs

Interim Other Antenna Cost Not Listed

Antenna Information not provided.

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

Primary Transmissio	Existing Transmission Line			
	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 Line Manufacturer and Type	Manufacturer		
		Туре	Rigid	
		Diameter	4 1/16 inches	
		Other Diameter	N/A	
		Segment Length	19 1/2 inches	
		Other Segment Length	N/A	
		Number of parallel runs	1	
		Length	550 feet per run	

Primary	New Transmission Line			
Transmissio	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	4 1/16 inches	
		Other Diameter	N/A	
		Segment Length	19 3/4 inches	
		Other Segment Length	N/A	
		Number of parallel runs	1	
		Length	550 feet per run	
		Justification for New Transmission Line	present line is the wrong length.	

Primary	Other Transmission Line Expenses Not Listed		
Transmissio	Name	Description	
	dehydrator	Dehydrator	

Interim	New Transmission Line				
Transmissio	n Section	Question	Response		
	New Transmission Line Costs	Use	Interim		
		Description of Use	N/A		
		Change Type	Purchase New		
		Туре	Flexible Air		
		Diameter	3 inches		
		Segment Length	N/A		
		Other Segment Length			
		Number of parallel runs	1		
		Length	500 feet per run		
		Justification for New Transmission Line	To remain on the air while antenna & line are changed.		

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

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?	
		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?	Unknown
	Existing Tower Structure Registration	Do you have a tower registration number?	Yes
		ASR Number	1042483
	Coordinates (NAD83 ( North American Datum of	Latitude (NAD83)	32° 24' 13.0" N-
	1983))	Longitude (NAD83)	086° 11' 49.0" W-
		Overall Structure Height	599.73 feet
		Support Structure Height	595.79 feet
		Ground Elevation Above Mean Sea Level (AMSL)	183.40 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	CUMULUS LICENSING CORP.
	Date Constructed	01/01/1978

## Primary Tower Section Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for documented tower
Tower Reinforceme	ents Please select whether tower reinforcements are needed:	No reinforcements needed

# Primary Tower Rigging Costs

Tower

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

# PrimaryOther Tower Expenses Not ListedTowerInformation not provided.

Outside Professional	Section	Question	Response
	Services Costs Outside Project Management Services	Do you require outside project management services?	No
		Number of Hours	N/A
		Explanation	N/A
	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	2
		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	Yes
		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	2
	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	No
	Number of Days	N/A
	Justification	N/A

Other Professional Services Expenses Not Listed Professional Services roopstsided.

Other	Section	Question	Response
Expenses	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	Yes
		FCC License to Cover Application	Yes
		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)?	No
		Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
		Does this relocation require Equipment Storage?	No
		Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	No
		Does this relocation require MVPD Notification of a Channel Change?	No

# 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 Cost Justification
Primary Transmitter HPTV-PRLX- U24	\$1,602,700.00	\$1,236,167.00		\$1,069,006.70	
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,106,667.00	N/A	\$1,010,906.70	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$5,000.00	N/A	N/A	N/A
Other Electrical Service: disconnects, labor	\$89,500.00	\$89,500.00	quoted	\$23,100.00	N/A
install	\$35,000.00	\$35,000.00	quoted installation	\$35,000.00	N/A
Sub-total	\$1,602,700.00	\$1,236,167.00	N/A	\$1,069,006.70	N/A
Total for all systems	\$2,626,565.00	\$2,031,482.00	N/A	\$1,589,782.79	N/A

#### Components

Actual Information Description

File Name

UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	Component Description: Amount:	30% 7 days prior to shipping \$303,272.01
	Component Description: Amount:	30% 60 days \$303,272.01
	Component Description: Amount:	5% proof \$50,545.33
	Component Description: Amount:	35% deposit \$353,817.35
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Other Electrical Service: disconnects, labor	Component Description: Amount:	xmitter electrical \$23,100.00
install	Component Description: Amount:	Xmitter install \$35,000.00

#### 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 RD12 c170	\$212,650.00	\$170,000.00		\$153,837.31	
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$15,000.00	N/A	N/A	N/A
UHF - Lower Power Side Mount, One station - 200-500 kW, horizontally polarized	\$189,500.00	\$155,000.00	N/A	\$153,837.31	N/A
Primary Antenna ATW20H3- HSOX-28H	\$218,710.00	\$204,700.00		\$128,304.00	
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	N/A	N/A

Total for all systems	\$2,626,565.00	\$2,031,482.00	N/A	\$1,589,782.79	N/A
Sub-total	\$431,360.00	\$374,700.00	N/A	\$282,141.31	N/A
Sweep test of existing antenna	\$6,730.00	\$6,700.00	N/A	\$5,625.00	N/A
UHF - High Power, Side Mount, basic slot antenna, 597 kW input, directional,, horizontally polarized	\$174,000.00	\$174,000.00	N/A	\$122,679.00	N/A
Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	\$9,570.00	\$4,000.00	N/A	N/A	N/A
brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$15,000.00	N/A	N/A	

Actual Information	
Description	File Name

1		
Side mount brackets for high power antennas (if not included in antenna base cost)	Information not provided.	
UHF - Lower Power Side Mount, One station - 200-500 kW, horizontally polarized	Component Description: Amount:	balance on Aux \$80,527.86
	Component Description: Amount:	deposit on Aux antenna \$73,309.45
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	Information not provided.	
Side mount brackets for high power antennas (if not included in antenna base cost)	Information not provided.	
Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	Information not provided.	
UHF - High Power, Side Mount, basic slot antenna, 597 kW input, directional,, horizontally polarized	Component Description: Amount:	30% prior to shipping \$40,893.00
	Component Description: Amount:	30% deposit mair antenna \$40,893.00
	Component Description: Amount:	30% 30 days \$40,893.00

Sweep test of existing antenna			
antenna	<b>Component Description:</b>	30% prior to	
		shipping	
	Amount:	\$1,875.00	
	<b>Component Description:</b>	30% deposit	
		system sweep	
	Amount:	\$1,875.00	
	Component Description:	30% 30 days	
	Amount:	\$1,875.00	

#### **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
Interim Transmission Line	\$29,500.00	\$22,000.00		\$0.00	
Flexible Air Transmission Line - dielectric, 3"	\$29,500.00	\$22,000.00	N/A	N/A	N/A
Primary Transmission Line	\$80,300.00	\$62,200.00		\$47,244.78	
dehydrator	\$2,200.00	\$2,200.00	dehydrator for line	\$1,912.50	N/A
Rigid Transmission Line - copper, 4 1 /16"	\$78,100.00	\$60,000.00	N/A	\$45,332.28	N/A
Sub-total	\$109,800.00	\$84,200.00	N/A	\$47,244.78	N/A
Total for all systems	\$2,626,565.00	\$2,031,482.00	N/A	\$1,589,782.79	N/A

Actual Information Description	File Name
Flexible Air Transmission Line - dielectric, 3"	Information not provided.

dehydrator		
	Component Description:	30% prior to
	Amount:	shipping \$637.50
	Component Description: Amount:	dehydrator \$637.50
	Component Description: Amount:	30% 30 days \$637.50
Rigid Transmission Line -		
copper, 4 1/16"	Component Description:	30% prior to
	Amount:	shipping \$15,110.76
	Component Description:	30% deposit line
	Amount:	\$15,110.76
	Component Description:	30% 30 days
	Amount:	\$15,110.76

#### **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 Primary	Predetermined Cost Estimate \$433,600.00	Estimated Cost \$302,000.00	Estimated Cost Justification	Actual Cost \$188,340.00	Actual Cost Justification
Tower TOWER					
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$300,000.00	N/A	\$188,340.00	N/A
Structural engineering tower load study for well documented tower	\$12,600.00	\$2,000.00	N/A	N/A	N/A
Sub-total	\$433,600.00	\$302,000.00	N/A	\$188,340.00	N/A
Total for all systems	\$2,626,565.00	\$2,031,482.00	N/A	\$1,589,782.79	N/A

Actual Information	
Description	File Name

Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	Component Description: Amount:	Aux antenna \$21,949.00
	Component Description: Amount:	Aux \$40,761.00
	Component Description: Amount:	main antenna \$32,664.00
	Component Description: Amount:	main antenna \$43,970.00
	Component Description: Amount:	main antenna \$48,996.00
Structural engineering tower load study for well documented tower	Information not provided.	

#### **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	\$35,915.00	\$30,700.00		\$3,050.00	
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,200.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$4,100.00	\$3,000.00	N/A	N/A	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	\$1,750.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$5,000.00	N/A	\$1,300.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,000.00	N/A	N/A	N/A
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Sub-total	\$35,915.00	\$30,700.00	N/A	\$3,050.00	N/A
Total for all systems	\$2,626,565.00	\$2,031,482.00	N/A	\$1,589,782.79	N/A

Actual Information Description	File Name
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Prepare request for Special Temporary Authorization	Information not provided.	
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	Component Description: Amount:	Engineering for FCC 2100 CP \$1,750.00
Perform engineering study for new channel assignment and antenna development	Component Description: Amount:	interference study for CP \$650.00
	Component Description: Amount:	Further interference study for CP \$650.00
Prepare and or review reimbursement form	Information not provided.	
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	Information not provided.	

#### **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	\$13,190.00	\$3,715.00		\$0.00	
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$2,200.00	N/A	N/A	N/A
Sub-total	\$13,190.00	\$3,715.00	N/A	\$0.00	N/A
Total for all systems	\$2,626,565.00	\$2,031,482.00	N/A	\$1,589,782.79	N/A

#### Components

Information not provided.

Cost	Grand Total			
Information		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$2,626,565.00	\$2,031,482.00	\$1,589,782.79

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.	
		<ol> <li>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>The above-named entity acknowledges that all certifications and attached documentation are</li> </ol>	
		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.	
I declare, under penalty of perjury, that I am an authorized representative of the above- named applicant for the Authorization(s) specified above.	Steve Hastings Network RF Manager 08/05/2020

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).	
		<ol> <li>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> </ol>	
		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).
- 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.

<ul> <li>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</li> <li>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.</li> </ul>	
I declare, under penalty of perjury, that I am an authorized representative of the above- named applicant for the Authorization(s) specified above.	<b>Steve</b> Hastings Network RF Manager
	08/05/2020

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.	
		<ol> <li>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.</li> <li>The above-named entity acknowledges the submission of the information are</li> </ol>	
		information herein creates no obligation on the part of the government to pay any amount.	

an aut nameo	are, under penalty of perjury, that I am horized representative of the above- d applicant for the Authorization(s) ied above.	Steve Hastings Network RF Manager
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.	
5.	The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.	
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.	
	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.	

#### Attachments