



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **70097** | Service: **DCA** | Call **WGTB-CD** | Channel: **27 (UHF)**  
 ID: | Sign:  
 File **0000028547**  
 Number:  
 FRN: **0009330457** | Date **08/14**  
 Submitted: **/2020**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>VICTORY CHRISTIAN CENTER, INC. Company</b>	Lynne Jackson P.O. BOX 16408	+1 (704) 602-6028	ljackson@vccenter.net	Other
Doing Business As: <b>VICTORY CHRISTIAN CENTER, INC.</b>	CHARLOTTE, NC 28297 United States			

## 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.	Yes
Briefly describe transition plan	Purchase main ANTENNA and MASK FILTER. Purchase an interim TRANSMITTER, ANTENNA and TRANSMISSION LINE. Install interim transmission system. Move to interim transmission system while replacement of main antenna is underway.

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

**Primary Transmitter Existing Transmitter Information**

Primary Transmitter	Section	Question	Response
	Existing Transmitter Description	Type of change	Retune Existing
Use		Primary (Main)	
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	UAX-500AT	

Year	2012
Type	Solid State
Solid State Cooling	Air Cooled
Solid State Power capacity	1 kW

**Primary Transmitter**

**Retuning Transmitter Costs**

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

**Primary Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	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
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A

	Size	N/A
	Other Size	N/A
<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**  
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
<b>Existing Antenna Description</b>	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
<b>Existing Antenna Manufacturer and Type</b>	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) .....	1.3 kW

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Manufacturer	
Model	AL8W-28
Year	2012

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**Primary  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	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
<b>New Antenna Manufacturer and Types</b>	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	ALP16L4- ESW-27
Year	2020
Justification for New Antenna	REPACK CHANNEL CHANGE

**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?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	1 5/8 inches inches
<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?	Yes
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

<b>Name</b>	<b>Description</b>
<b>UHF Filter System</b>	UHF Filter System
<b>SPX Model A600C Air Dryer</b>	SPX Model A600C Air Dryer
<b>Custom Mounts</b>	Custom Mounts

**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 Air
	Diameter	Other
	Other Diameter	2 1/4 inches
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	0
	Length	1400 feet per run

**Primary  
Transmission  
Line**      **New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Flexible Air
	Diameter	3 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1350 feet per run
	Justification for New Transmission Line	A sweep of the existing line determined it to be unusable.

**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?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	Yes
	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	1006705
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	35° 21' 44.5" N-
	Longitude (NAD83)	081° 09' 18.3" W-
	Overall Structure Height	1943.55 feet
	Support Structure Height	1887.44 feet
	Ground Elevation Above Mean Sea Level (AMSL)	805.76 feet

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Fox Television Stations, LLC
Date Constructed	01/01/1986

**FM, AM or TV radio  
broadcasters. Facility ID's,  
Call Signs and Services of  
other broadcast stations with  
whom the tower is shared**

Facility ID	Call Sign	Service
6586	WPEG	FM
20624	WMYT-TV	DTV
53975	WNKS	FM
74194	WHQC	FM
73152	WJZY	DTV

**Other Types of Users**

Users
WQPA823
KPJ464
WLJ547
WMW670
WPNC378
WPNF947

**Primary Tower**

**Tower Modification Costs**

Section	Question	Response
<b>Engineering Study</b>	Please what type of engineering study is required, if any:	Study needed for documented tower
<b>Tower Reinforcements</b>	Please select whether tower reinforcements are needed:	No reinforcements needed

**Primary Tower**

**Tower Rigging Costs**

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

**Primary Tower**

**Other Tower Expenses Not Listed**

Information not provided.



**Outside Professional Services Costs**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	300
	Explanation	Do not have enough in-house staff to execute and manage this project. Antenna is 25 miles way from studio.
<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	Yes
	Quantity	1
	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	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	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	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	Yes
	Number of Days	21
	Justification	Verify system compliance

**Outside  
Professional  
Services  
Costs**

**Other Professional Services Expenses Not Listed**

Name	Description
Other Engineering Services	Other Engineering Services

**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	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
<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**

Information not provided.

**Cost Information**

**Transmitters**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Transmitter UAX-500AT</b>	<b>\$109,355.00</b>	<b>\$109,355.00</b>		<b>\$0.00</b>	
UHF and VHF - minor banding issues	\$105,200.00	\$105,200.00	N/A	N/A	N/A
3 kW mask filter	\$4,155.00	\$4,155.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$109,355.00</b>	<b>\$109,355.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$698,645.30</b>	<b>\$595,700.31</b>	<b>N/A</b>	<b>\$187,131.01</b>	<b>N/A</b>

**Components**

Information not provided.

**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 ALP16L4-ESW-27</b>	<b>\$50,835.30</b>	<b>\$63,042.02</b>		<b>\$29,772.87</b>	
Custom Mounts	<i>\$0.00</i>	\$0.00	See attached / uploaded PDF file titled "ERI WGTB-37828A v200602jgv1.pdf"	\$0.00	N/A
SPX Model A600C Air Dryer	<i>\$4,707.30</i>	\$4,707.30	See attached / uploaded PDF file titled "ERI WGTB-37828A v200602jgv1.pdf"	\$2,353.65	N/A
Elbow complex, single channel, 1 5/8" input (if needed)	\$6,900.00	\$6,900.00	N/A	N/A	N/A

Sweep test of existing antenna	\$6,730.00	\$18,936.72	See attached / uploaded PDF files titled "Cesium 2020-0215A v200311jgv1.pdf" and "ERI WGTB-37828A v200602jgv1.pdf"	\$15,811.72	N/A
UHF - Lower Power Side Mount, Class A One Station antenna -- basic	\$26,300.00	\$26,300.00	See attached / uploaded PDF file titled "ERI WGTB-37828A v200602jgv1.pdf"	\$8,508.50	N/A
UHF Filter System	<i>\$6,198.00</i>	\$6,198.00	See attached / uploaded PDF file titled "ERI WGTB-37828A v200602jgv1.pdf"	\$3,099.00	N/A
<b>Sub-total</b>	\$50,835.30	\$63,042.02	N/A	\$29,772.87	N/A
<b>Total for all systems</b>	\$698,645.30	\$595,700.31	N/A	\$187,131.01	N/A

## Components

Actual Information	
Description	File Name



Custom Mounts	<p><b>Component Description:</b> ERI WGTB-37828A v200602jgv1</p> <p><b>Amount:</b> N/A</p>
SPX Model A600C Air Dryer	<p><b>Component Description:</b> ERI WGTB-37828A v200602jgv1</p> <p><b>Amount:</b> \$2,353.65</p>
Elbow complex, single channel, 1 5/8" input (if needed)	Information not provided.
Sweep test of existing antenna	<p><b>Component Description:</b> Cesium 2020-0215A v200311jgv1</p> <p><b>Amount:</b> \$12,686.72</p> <p><b>Component Description:</b> ERI WGTB-37828A v200602jgv1</p> <p><b>Amount:</b> \$3,125.00</p>
UHF - Lower Power Side Mount, Class A One Station antenna -- basic	<p><b>Component Description:</b> ERI WGTB-37828A v200602jgv1</p> <p><b>Amount:</b> \$8,508.50</p>
UHF Filter System	<p><b>Component Description:</b> ERI WGTB-37828A v200602jgv1</p> <p><b>Amount:</b> \$3,099.00</p>

**Cost Information**

**Transmission Line**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Transmission Line</b>	<b>\$79,650.00</b>	<b>\$54,996.29</b>		<b>\$27,498.14</b>	
Flexible Air Transmission Line - dielectric, 3"	\$79,650.00	\$54,996.29	See attached / uploaded PDF file titled "ERI WGTB-37828A v200602jgv1.pdf"	\$27,498.14	N/A
<b>Sub-total</b>	<b>\$79,650.00</b>	<b>\$54,996.29</b>	N/A	<b>\$27,498.14</b>	N/A
<b>Total for all systems</b>	<b>\$698,645.30</b>	<b>\$595,700.31</b>	N/A	<b>\$187,131.01</b>	N/A

**Components**

Actual Information	
Description	File Name
Flexible Air Transmission Line - dielectric, 3"	<p><b>Component Description:</b> ERI WGTB-37828A v200602jgv1</p> <p><b>Amount:</b> \$27,498.14</p>

**Cost Information**

**Tower Equipment and Rigging Costs**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Tower TOWER</b>	<b>\$223,100.00</b>	<b>\$179,332.00</b>		<b>\$94,416.00</b>	
Structural engineering tower load study for well documented tower	\$12,600.00	\$9,500.00	See attached / uploaded PDF files titled "ERI 37828 v200312jgv1.pdf" and "ERI 55754 v200814jgv1.pdf"	\$9,500.00	N/A
Tall Tower (greater than 500')	\$210,500.00	\$169,832.00	See attached / uploaded PDF file titled "ERI WGTB-37828A v200602jgv1.pdf"	\$84,916.00	N/A
<b>Sub-total</b>	<b>\$223,100.00</b>	<b>\$179,332.00</b>	N/A	<b>\$94,416.00</b>	N/A
<b>Total for all systems</b>	<b>\$698,645.30</b>	<b>\$595,700.31</b>	N/A	<b>\$187,131.01</b>	N/A

**Components**

Actual Information Description	File Name
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Structural engineering tower load study for well documented tower	<p><b>Component Description:</b> ERI 55754 v200814jgv1</p> <p><b>Amount:</b> \$4,000.00</p>
	<p><b>Component Description:</b> ERI 37828 v200312jgv1</p> <p><b>Amount:</b> \$5,500.00</p>
Tall Tower (greater than 500')	<p><b>Component Description:</b> ERI WGTB-37828A v200602jgv1</p> <p><b>Amount:</b> \$84,916.00</p>

**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>\$209,855.00</b>	<b>\$163,125.00</b>		<b>\$35,444.00</b>	
Other Engineering Services	<i>\$14,390.00</i>	\$14,390.00	Cost estimate for other engineering services such as RF calculations, evolving transition plan calculations, bid spec prep / distribution / award recommendation / etc and discussion, etc.	\$14,390.00	N/A
Additional Field Engineering Service, 21 Days	<i>\$10,000.00</i>	\$10,000.00	N/A	\$1,690.00	N/A
RF Exposure Measurements	\$21,050.00	\$21,050.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$36,300.00	See attached / uploaded PDF file titled "Accepted WGTB RF Testing Proposal 20200618 v200702jgv1.pdf"	N/A	N/A

FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$2,105.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,680.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,365.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,260.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$2,050.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,580.00	N/A	N/A	N/A

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,155.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,360.00	N/A	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,630.00	N/A	N/A	N/A
Project management of the transition	\$47,400.00	\$47,400.00	N/A	\$15,564.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$3,800.00	The Estimated Cost includes Form 399 submissions including ongoing Actual Cost invoice prep and submission, and amendments as needed.	\$3,800.00	N/A
<b>Sub-total</b>	\$209,855.00	\$163,125.00	N/A	\$35,444.00	N/A
<b>Total for all systems</b>	\$698,645.30	\$595,700.31	N/A	\$187,131.01	N/A

## Components

Actual Information Description	File Name
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Other Engineering Services	<p><b>Component Description:</b> Osborn 39305 v200811jgv1</p> <p><b>Amount:</b> \$925.00</p> <p><b>Component Description:</b> Osborn 38989 v200811jgv1</p> <p><b>Amount:</b> \$13,465.00</p>
Additional Field Engineering Service, 21 Days	<p><b>Component Description:</b> Modern BSI 2165 v200225jgv2</p> <p><b>Amount:</b> \$1,690.00</p>
RF Exposure Measurements	Information not provided.
Comprehensive coverage verification via field study, if needed	Information not provided.
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.
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.



<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<p>Information not provided.</p>																
<p>Perform engineering study for new channel assignment and antenna development</p>	<p>Information not provided.</p>																
<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<p>Information not provided.</p>																
<p>Project management of the transition</p>	<table> <tr> <td data-bbox="708 676 1018 712"><b>Component Description:</b></td> <td data-bbox="1152 676 1321 748">Osborn 38739 v200611jgv1</td> </tr> <tr> <td data-bbox="708 757 820 792"><b>Amount:</b></td> <td data-bbox="1152 757 1273 792">\$3,082.00</td> </tr> <tr> <td data-bbox="708 896 1018 931"><b>Component Description:</b></td> <td data-bbox="1152 896 1321 967">Osborn 38281 v200604pmv1</td> </tr> <tr> <td data-bbox="708 976 820 1012"><b>Amount:</b></td> <td data-bbox="1152 976 1273 1012">\$4,108.00</td> </tr> <tr> <td data-bbox="708 1115 1018 1151"><b>Component Description:</b></td> <td data-bbox="1152 1115 1321 1187">Osborn 39305 v200811jgv1</td> </tr> <tr> <td data-bbox="708 1196 820 1232"><b>Amount:</b></td> <td data-bbox="1152 1196 1273 1232">\$4,029.00</td> </tr> <tr> <td data-bbox="708 1335 1018 1370"><b>Component Description:</b></td> <td data-bbox="1152 1335 1321 1406">Osborn 38989 v200811jgv1</td> </tr> <tr> <td data-bbox="708 1415 820 1451"><b>Amount:</b></td> <td data-bbox="1152 1415 1273 1451">\$4,345.00</td> </tr> </table>	<b>Component Description:</b>	Osborn 38739 v200611jgv1	<b>Amount:</b>	\$3,082.00	<b>Component Description:</b>	Osborn 38281 v200604pmv1	<b>Amount:</b>	\$4,108.00	<b>Component Description:</b>	Osborn 39305 v200811jgv1	<b>Amount:</b>	\$4,029.00	<b>Component Description:</b>	Osborn 38989 v200811jgv1	<b>Amount:</b>	\$4,345.00
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<b>Component Description:</b>	Osborn 38989 v200811jgv1																
<b>Amount:</b>	\$4,345.00																

Prepare and or review  
reimbursement form

**Component Description:** Osborn 38989  
v200811jgv1  
**Amount:** \$50.00

**Component Description:** Osborn 38739  
v200611jgv1  
**Amount:** \$1,200.00

**Component Description:** Osborn 38281  
v200604pmv1  
**Amount:** \$200.00

**Component Description:** Osborn 39305  
v200811jgv1  
**Amount:** \$2,350.00

**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>\$25,850.00</b>	<b>\$25,850.00</b>		<b>\$0.00</b>	
MVPD Notification of Channel Change	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$3,000.00</i>	\$3,000.00	N/A	N/A	N/A
Equipment Storage	<i>\$500.00</i>	\$500.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$3,300.00</i>	\$3,300.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,550.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$2,500.00</i>	\$2,500.00	N/A	N/A	N/A
<b>Sub-total</b>	\$25,850.00	\$25,850.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$698,645.30	\$595,700.31	N/A	\$187,131.01	N/A

**Components**

Information not provided.

**Cost Information** **Grand Total**

	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>	<b>Actual Cost</b>
<b>Total for all systems</b>	\$698,645.30	\$595,700.31	\$187,131.01

**Reimbursement Status**

<b>Question</b>	<b>Response</b>
The facility has ceased operating on its pre-auction channel.	Yes
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
	<b>Submission of Estimated Expenses Statements</b>	<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.

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.

**Jeffrey C  
Gehman**  
*Engineering  
Associate*

08/14/2020

Certification	Section	Question	Response
	<b>Submission of Actual Cost Documentation Statements</b>	<p>WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).</p>	
		<ol style="list-style-type: none"> <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.

8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**Jeffrey C  
Gehman**  
*Engineering  
Associate*

08/14/2020

## Attachments