



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **4353** | Service: **DCA** | Call **WDES-CD** | Channel: **22 (UHF)** |
ID: | Sign:
File **0000027960**
Number:
FRN: **0004941621** | Date **01/15**
Submitted: **/2021**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|---|---|-----------------------------|------------------------------------|----------------|
| BEACH TV PROPERTIES, INC. Doing Business As: BEACH TV PROPERTIES, INC. | Byron J. Colley, Jr. 8317 Front Beach Road Suite 23 PANAMA CITY BEACH, FL 32407 United States | +1 (850) 276- 9552 | jud. colley@tripsmarter. com | Corporation |

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 |
|--|---|
| 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 | Transition to channel 22, to maintain signal, a new antenna will be mounted above the present and become the main antenna after the transition. A new transmitter and mask filter will be needed. |

Transmitters

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

**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 | DT834A 300 watts |
| | Year | 2000 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | .30 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 | UAXTE-1-P2R37 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power capacity | .40 kW |
| | Justification for New Transmitter | Old transmitter cannot be retuned. |

**Primary
Transmitter**

Other Transmitter Costs

| Section | Question | Response |
|--------------------|---------------------------------------|----------|
| Electrical Service | Service Entrance (3 phases 800A 208V) | No |
| | Switchgear (industrial 800 amp) | No |
| | Transformer (480V) | No |
| | Power | N/A |
| | Rigid Conduit and Wiring | No |
| | Size | N/A |
| | Length | N/A |
| | Other Electrical Service | Yes |
| | Description | 120/240 |

| | | |
|--|---|--------------|
| HVAC Service | Does the replacement transmitter require HVAC Service? | Yes |
| | Type | Cooling Only |
| | Size | 5 tons |
| | 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 | Class A |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | Type | Slotted Coaxial |
| | Number of Stations Supported | N/A |
| | Number of Panels | N/A |
| | Design power capacity in use | N/A |
| | Lower Limit | N/A |
| | Upper Limit | N/A |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 5.0 kW |
| | | |

| | |
|--------------|--------------|
| Manufacturer | |
| Model | PSILP8ABR-35 |
| Year | 2017 |

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 | 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) | 3.78 kW |
| | Manufacturer | |
| | | |

| | |
|-------------------------------|---------------------------------------|
| Model | ATC-BCE46BR-V2-22 |
| Year | 2018 |
| Justification for New Antenna | New antenna needed for new frequency. |

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 | Flexible Air |
| | Diameter | 1 5/8 inches |
| | Other Diameter | N/A |
| | Segment Length | N/A |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 170 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 | Flexible Air |
| | Diameter | 1 5/8 inches |
| | Other Diameter | N/A |
| | Segment Length | N/A |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 200 feet per run |
| | Justification for New Transmission Line | New transmission line needed for new antenna. |

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 | Move Equipment |
| | 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? | Yes |
| Existing Tower Structure Registration | Do you have a tower registration number? | No |
| | ASR Number | |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 30° 23' 50.0" N- |
| | Longitude (NAD83) | 086° 30' 27.0" W- |
| | Overall Structure Height | 187.99 feet |
| | Support Structure Height | 180.12 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 15.09 feet |

| | | |
|--|------------------|--|
| | Structure Type | TOWER - Free Standing or Guyed Structure |
| | Tower Owner | Beach TV Properties, Inc. |
| | Date Constructed | 09/30/1997 |

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 |
|---------------------|---------------------------------------|
| Structural Analysis | Structural analysis of existing tower |
| Tower Crew | Remove and replace antennas. |

**Outside
Professional**

| Section | Question | Response |
|---|--|---|
| Services Costs Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 620 |
| | Explanation | No internal ability to accomplish services. |
| 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 | Yes |
| | For Main Facility | Yes |
| | Prepare engineering section of Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | Yes |
| | 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 | Yes |
| | For Main Facility | Yes |
| | Prepare and file Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | Yes |

| | | |
|--------------------------------------|--|-----|
| | 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 | Yes |
| | Address transition timing and coordination issues w/ other stations and wireless providers | Yes |
| RF Field Engineering Services | Comprehensive coverage verification via field study | Yes |
| | RF exposure measurements | Yes |
| | Additional Field Engineering Service | No |
| | Number of Days | N/A |
| | Justification | N/A |

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

| Name | Description |
|-------------------------------|---|
| Thomaston Broadcasting | Transmitter and tower work. 80 hrs x \$40 /hr. \$1,600. |
| Thomaston Broadcasting | WDES 8 hr x \$40/hr. \$320 Preparation of 399. |

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 | Yes |
| | Non-zoning permits | No |
| | BLM or NFS Coordination | No |
| | FCC Construction Permit Minor Change | No |
| | FCC License to Cover Application | Yes |
| | 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)? | Yes |
| | Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs? | Yes |
| | Does this relocation require Equipment Storage? | Yes |
| | Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change? | Yes |
| | Does this relocation require MVPD Notification of a Channel Change? | Yes |

**Other
Expenses**

Other Expenses Not Listed

| Name | Description |
|-------------|--------------------------|
| Mask Filter | Gates Air FLUA-00625-6AT |

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 UAXTE-1-P2R37 | \$59,188.42 | \$48,938.42 | | \$43,759.08 | |
| 5 Ton system | \$20,250.00 | \$10,000.00 | N/A | \$8,768.61 | N/A |
| Other Electrical Service: 120 /240 | \$3,500.00 | \$3,500.00 | N/A | N/A | N/A |
| UHF - Air Cooled Solid State Transmitter . 40 kW | \$35,438.42 | \$35,438.42 | Quote GA-00021736 | \$34,990.47 | N/A |
| Sub-total | \$59,188.42 | \$48,938.42 | N/A | \$43,759.08 | N/A |
| Total for all systems | \$491,618.42 | \$379,859.42 | N/A | \$157,476.86 | N/A |

Components

| Actual Information | |
|---|--|
| Description | File Name |
| 5 Ton system | <div>Component Description: Installed a Bard system.</div> <div>Amount: \$8,768.61</div> |
| Other Electrical Service: 120 /240 | Information not provided. |
| UHF - Air Cooled Solid State Transmitter .40 kW | |

| | |
|-------------------------------|--|
| Component Description: | 1/3 due prior to shipping. See Gates Air proposal GA-00021736. |
| Amount: | \$11,040.01 |

| | |
|-------------------------------|--|
| Component Description: | Installation and Completion of new transmitter (New 1st Primary Transmitter) |
| Amount: | \$280.00 |

| | |
|-------------------------------|-------------------------------|
| Component Description: | WDES Transmitter installation |
| Amount: | \$1,040.00 |

| | |
|-------------------------------|-----------------------------|
| Component Description: | Transmitter and mask filter |
| Amount: | \$13,137.83 |

| | |
|-------------------------------|------------------|
| Component Description: | 1/3 Down Payment |
| Amount: | \$9,212.63 |

| | |
|-------------------------------|---|
| Component Description: | 1/3 Down payment. Invoice does not include tax and freight. See Gates Air proposal GA-00021736. |
| Amount: | \$11,040.01 |

Component Description:

Performing tests
on WDES
transmitter by
Wade
Thomaston.

Amount:

\$280.00

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 ATC-BCE46BR-V2-22 | \$33,030.00 | \$21,865.00 | | \$16,724.00 | |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | \$1,260.00 | N/A |
| UHF - Lower Power Side Mount, Class A One Station antenna -- basic | \$26,300.00 | \$15,465.00 | The final invoice includes \$1,200 for the cost of shipping the antenna that was not included in the original quote. | \$15,464.00 | The final invoice includes \$1,200 for the cost of shipping the antenna that was not included in the original quote. |
| Sub-total | \$33,030.00 | \$21,865.00 | N/A | \$16,724.00 | N/A |
| Total for all systems | \$491,618.42 | \$379,859.42 | N/A | \$157,476.86 | N/A |

Components

| Actual Information Description | File Name |
|--------------------------------|-----------|
|--------------------------------|-----------|

| | |
|--|---|
| Sweep test of existing antenna | <div data-bbox="715 174 1366 367"> <p>Component Description: 1/2 down with order. See Alive Telecom proposal #2252017-2.</p> <p>Amount: \$1,500.00</p> </div> <div data-bbox="715 474 1366 667"> <p>Component Description: Swept the WDES Transmission line and antenna system</p> <p>Amount: \$1,260.00</p> </div> |
| UHF - Lower Power Side Mount, Class A One Station antenna -- basic | <div data-bbox="715 808 1378 880"> <p>Component Description: ATC-BCH46BR-22</p> <p>Amount: \$6,925.00</p> </div> <div data-bbox="715 987 1342 1097"> <p>Component Description: Replacement of antenna</p> <p>Amount: \$414.00</p> </div> <div data-bbox="715 1205 1326 1314"> <p>Component Description: Antenna-AYC-BCH46BR-22</p> <p>Amount: \$8,125.00</p> </div> |

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 | \$6,600.00 | \$7,851.00 | | \$7,851.00 | |
| Flexible Air Transmission Line - dielectric, 1 5 /8" | \$6,600.00 | \$7,851.00 | po#135 | \$7,851.00 | N/A |
| Sub-total | \$6,600.00 | \$7,851.00 | N/A | \$7,851.00 | N/A |
| Total for all systems | \$491,618.42 | \$379,859.42 | N/A | \$157,476.86 | N/A |

Components

| Actual Information Description | File Name |
|-----------------------------------|-----------|
|-----------------------------------|-----------|

Flexible Air Transmission
Line - dielectric, 1 5/8"

Component Description:

TX Line system
and dehydrator

Amount:

\$3,250.00

Component Description:

TX Line System -
185 ft of HJ7-50A
1-5/8 Aire Cable
Terminated w/ 7/8
EIA Connectors,
Gas Barrier w/
Inner Anchor

Amount:

\$4,415.00

Component Description:

Replacement of
transmission line
(New Primary
Transmission Line)

Amount:

\$186.00

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 TOWER | \$119,200.00 | \$40,000.00 | | \$13,829.55 | |
| Short Tower (less than 500') | \$84,200.00 | \$5,000.00 | N/A | N/A | N/A |
| Tower Crew | \$25,000.00 | \$25,000.00 | N/A | \$11,379.55 | N/A |
| Structural Analysis | \$10,000.00 | \$10,000.00 | Structural analysis of existing tower | \$2,450.00 | N/A |
| Sub-total | \$119,200.00 | \$40,000.00 | N/A | \$13,829.55 | N/A |
| Total for all systems | \$491,618.42 | \$379,859.42 | N/A | \$157,476.86 | N/A |

Components

| Actual Information Description | File Name |
|--------------------------------|---|
| Short Tower (less than 500') | Information not provided. |
| Tower Crew | <div>Component Description: Antenna Swap Out</div> <div>Amount: \$11,379.55</div> |

Structural Analysis

Component Description: Structural Analysis and Report
Amount: \$1,200.00

Component Description: Structural Tower Analysis
Amount: \$1,250.00

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 | \$238,005.00 | \$226,170.00 | | \$74,152.52 | |
| Thomaston Broadcasting | <i>\$1,920.00</i> | \$1,920.00 | N/A | \$1,160.00 | N/A |
| RF Exposure Measurements | \$21,050.00 | \$20,000.00 | N/A | N/A | N/A |
| 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 - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application | \$4,210.00 | \$4,000.00 | 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 |

| | | | | | |
|---|------------|------------|-----|------------|-----|
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application | \$1,580.00 | \$1,500.00 | 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 | \$1,500.00 | N/A |
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application | \$2,105.00 | \$2,000.00 | 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 | \$1,000.00 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$1,500.00 | N/A |

| | | | | | |
|--|--------------|--------------|-----|--------------|-----|
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$2,500.00 | N/A | N/A | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | \$1,308.75 | N/A |
| Project management of the transition | \$97,960.00 | \$93,000.00 | N/A | \$67,683.77 | N/A |
| Sub-total | \$238,005.00 | \$226,170.00 | N/A | \$74,152.52 | N/A |
| Total for all systems | \$491,618.42 | \$379,859.42 | N/A | \$157,476.86 | N/A |

Components

| Actual Information | |
|--|---|
| Description | File Name |
| Thomaston Broadcasting | <p>Component Description: Working on transmitter install.</p> <p>Amount: \$280.00</p> <p>Component Description: 2/14/2019 WDES # 4353 Air Conditioning quotes.</p> <p>Amount: \$160.00</p> <p>Component Description: Contract Labor</p> <p>Amount: \$720.00</p> |
| RF Exposure Measurements | Information not provided. |
| 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 - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application | Information not provided. |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | Information not provided. |
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application | Information not provided. |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | <p>Component Description: COORDINATION CLIENT, ANTENNA MANUFACTURE, LOCAL ENGINEER AND FCC LEGAL COUNSEL</p> <p>Amount: \$1,500.00</p> |
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application | Information not provided. |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | <p>Component Description: FCC App for CP for minor change in frequency including FCC attorney and client coordination.</p> <p>Amount: \$1,000.00</p> |

| | |
|--|--|
| Perform engineering study for new channel assignment and antenna development | <div> Component Description: Replication filing - Review antenna and system data to be specified in CP App. Engineering for App. Limited 399 assistance. </div> <div> Amount: \$1,500.00 </div> <div> Component Description: Structural analysis. </div> <div> Amount: \$1,250.00 </div> <div> Component Description: Site visit. </div> <div> Amount: \$1,200.00 </div> |
| Address transition timing and coordination issues w/ other stations and wireless | Information not provided. |
| Prepare and or review reimbursement form | <div> Component Description: Prepare and Review Reimbursement Form </div> <div> Amount: \$508.75 </div> <div> Component Description: Completion of 399 forms. </div> <div> Amount: \$80.00 </div> <div> Component Description: Get quotes for replacement antenna, help in filing 399. </div> <div> Amount: \$720.00 </div> |
| Project management of the transition | <div> Component Description: Project Management </div> <div> Amount: \$70.00 </div> |

| | |
|-------------------------------|--------------------|
| Component Description: | Project management |
| Amount: | \$1,751.05 |

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|-------------------------------|-----------------------|
| Component Description: | Project Management |
| Amount: | \$93.75 |

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| Component Description: | Project Management |
| Amount: | \$2,894.20 |

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| Component Description: | Project Management |
| Amount: | \$2,618.25 |

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| Component Description: | Project Management |
| Amount: | \$1,624.50 |

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| Component Description: | Project Management |
| Amount: | \$1,942.85 |

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| Component Description: | Project Management |
| Amount: | \$1,759.55 |

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| Component Description: | Project Management |
| Amount: | \$1,841.15 |

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| Component Description: | Project Management |
| Amount: | \$2,268.95 |

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| Component Description: | Project Management |
| Amount: | \$2,671.35 |

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| Component Description: | Project Management |
| Amount: | \$2,241.65 |

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| Component Description: | Project Management |
| Amount: | \$2,014.55 |

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| Component Description: | Project Management |
| Amount: | \$77.50 |

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| Component Description: | Review initial FCC notification. Email time with client reviewing the FCC filing process. |
| Amount: | \$339.17 |

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| Component Description: | Project management |
| Amount: | \$2,418.35 |

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| Component Description: | Project Management |
| Amount: | \$2,109.65 |

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| Component Description: | Project Management |
| Amount: | \$3,094.70 |

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| Component Description: | Project Management |
| Amount: | \$3,447.20 |

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| Component Description: | Project Management |
| Amount: | \$2,246.25 |

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| Component Description: | Project Management |
| Amount: | \$62.50 |

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| Component Description: | Project Management |
| Amount: | \$2,581.80 |

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| Component Description: | Project Management |
| Amount: | \$1,992.60 |

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| Component Description: | Project Management |
| Amount: | \$1,760.05 |

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| Component Description: | Project Management |
| Amount: | \$3,520.70 |

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| Component Description: | Project Management |
| Amount: | \$2,589.85 |

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| Component Description: | Project Management |
| Amount: | \$2,229.05 |

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| Component Description: | Project Management |
| Amount: | \$1,839.25 |

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| Component Description: | Project Management |
| Amount: | \$1,756.25 |

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| Component Description: | Project Management |
| Amount: | \$70.00 |

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| Component Description: | Project Management |
| Amount: | \$1,752.00 |

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| Component Description: | Project Management |
| Amount: | \$2,109.20 |

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| Component Description: | FCC 387 form preparation |
| Amount: | \$175.00 |

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| Component Description: | Project Management |
| Amount: | \$2,548.40 |

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| Component Description: | Project Management |
| Amount: | \$3,753.05 |

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| Component Description: | Project Management |
| Amount: | \$1,419.45 |

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 | \$35,595.00 | \$35,035.00 | | \$1,160.71 | |
| MVPD Notification of Channel Change | <i>\$2,500.00</i> | \$2,500.00 | N/A | N/A | N/A |
| Develop and air announcement of upcoming channel change | <i>\$2,500.00</i> | \$2,500.00 | N/A | N/A | N/A |
| Equipment Storage | <i>\$2,500.00</i> | \$2,500.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | <i>\$5,000.00</i> | \$5,000.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$5,000.00</i> | \$5,000.00 | N/A | N/A | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | 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 |
| Local Zoning | <i>\$2,500.00</i> | \$2,500.00 | N/A | N/A | N/A |

| | | | | | |
|------------------------------|-------------------|--------------|-----|--------------|-----|
| Mask Filter | \$3,710.00 | \$3,710.00 | N/A | \$1,160.71 | N/A |
| Sub-total | \$35,595.00 | \$35,035.00 | N/A | \$1,160.71 | N/A |
| Total for all systems | \$491,618.42 | \$379,859.42 | N/A | \$157,476.86 | N/A |

Components

| Actual Information | |
|--|--|
| Description | File Name |
| MVPD Notification of Channel Change | Information not provided. |
| Develop and air announcement of upcoming channel change | Information not provided. |
| Equipment Storage | Information not provided. |
| Equipment Delivery and Handling Charges | Information not provided. |
| Disposal Costs (for equipment and other waste, net of any salvage value) | Information not provided. |
| DTV Medical Facility Notification | Information not provided. |
| FCC Filing Fees - Form 2100 license to cover application | Information not provided. |
| Local Zoning | Information not provided. |
| Mask Filter | <p>Component Description: WDES-610-Mask Filter</p> <p>Amount: \$1,160.71</p> |

**Cost
Information**

Grand Total

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|------------------------------|--|-----------------------|--------------------|
| Total for all systems | \$491,618.42 | \$379,859.42 | \$157,476.86 |

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>Jud Colley <i>Owner</i> 01/15/2021</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>Jud Colley <i>Owner</i></p> <p>01/15/2021</p> |

Attachments