



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **73318** | Service: **DTV** | Call **WNEP-TV** | Channel: **21 (UHF)**  
ID: | Sign:  
File **0000027985**  
Number:  
FRN: **0028358455** | Date **01/26**  
Submitted: **/2021**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>TEGNA Broadcast Holdings, LLC</b>	Denise A. Branson, Sr. Paralegal 8350 BROAD STREET, SUITE 2000 Tysons, VA 22102 United States	+1 (703) 873-6606	dbranson@tegna. com	Limited Liability Company

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address	Phone	Email
<b>Bill Vanduyhoven , Vanduyhov .</b> <i>Director of Engineering operations Tribune Broadcasting</i>	Bill Vanduyhoven 2211 Rabbit Hill Cir Dacula, GA 30019 United States	+1 (404) 312- 8693	BillV@Tribunemedia. com

**Broadcaster  
Information  
and  
Transition  
Plan**

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

**Transmitters**

Section	Question	Response
<b>Transmitter Related Expenses</b>	Do you have transmitter related expenses?	Yes

**Primary  
Transmitter**

**Existing Transmitter Information**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	SigmaCD- P2
	Year	2008
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	60 kW

**Primary Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	ULXTE-72
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	44 kW
	Justification for New Transmitter	Current transmitter is not re tunable as state by the manufacturer

**Primary Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	Yes
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	200.0 feet
	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?	No
	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	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	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) .....	500.0 kW

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Manufacturer	
Model	ATW18H3H
Year	2009

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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?	No
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	No
<b>New Antenna Manufacturer and Types</b>	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	248.0 kW
Manufacturer		

Model	TFU13-JTH /VP-R o4
Year	2020
Justification for New Antenna	Current antenna will not operate on assigned channel

**Primary Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Combiner for Shared Antenna</b>	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
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	6 1/8 inches inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

<b>Name</b>	<b>Description</b>
<b>Tower Top Interface</b>	Elbows and Line to transition at the top of the tower

**Interim  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	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
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Slot
	Number of Stations Supported	1
	Number of Panels/Bays	8
	Lower Limit	470.00 MHz
	Upper Limit	670.00 MHz
	Design power capacity in use	90.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	200.0 kW
	Manufacturer	
	Model	TFU-8WB- 1-R
	Year	2018

Justification for New Antenna

Temporary antenna to operate form during transition.

**Interim Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	S
	Feed Line Size	4 1/16 inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for an antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Interim 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?

**Primary Transmission Line**  
**Existing Transmission Line**

Section	Question	Response
Existing Transmission Line Description	Type of change	Utilize Existing
	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	ERI
	Type	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	19 3/4 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1000 feet per run

**Primary Transmission Line**      **Other Transmission Line Expenses Not Listed**

Name	Description
Retuning	Line adjustments for new channel

**Interim Transmission Line**      **New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Rigid
	Diameter	4 1/16 inches
	Segment Length	19 3/4 '
	Other Segment Length	
	Number of parallel runs	1
	Length	900 feet per run
	Justification for New Transmission Line	Temporary Line to operate from during transition. We are awaiting quotes in this system

**Interim 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	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?	Yes
	ASR Number	1266878
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	41° 10' 57.2" N-
	Longitude (NAD83)	075° 52' 13.9" W-
	Overall Structure Height	836.28 feet
	Support Structure Height	802.81 feet
	Ground Elevation Above Mean Sea Level (AMSL)	2134.82 feet



Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Local TV Pennsylvania, LLC
Date Constructed	01/23/2009

**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:	Minor 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?	No
	Number of Hours	N/A
	Explanation	N/A
<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
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)	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
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	No
	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
Other Engineering Services	Other Engineering Services
Project management of the transition	Project management of the transition

**Other Expenses**

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

**Other  
Expenses**

**Other Expenses Not Listed**

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 ULXTE-72</b>	<b>\$1,530,800.00</b>	<b>\$1,393,860.00</b>		<b>\$0.00</b>	
2" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$5,000.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$12,000.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,340,560.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$1,530,800.00</b>	<b>\$1,393,860.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$2,740,768.25</b>	<b>\$2,150,238.25</b>	<b>N/A</b>	<b>\$26,953.25</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>Interim Antenna TFU-8WB-1-R</b>	<b>\$205,800.00</b>	<b>\$74,400.00</b>		<b>\$0.00</b>	
Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	\$9,570.00	\$8,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - Lower Power Side Mount, One station - 200-500 kW, horizontally polarized	\$189,500.00	\$60,000.00	N/A	N/A	N/A
<b>Primary Antenna TFU13-JTH /VP-R o4</b>	<b>\$328,530.00</b>	<b>\$177,400.00</b>		<b>\$0.00</b>	
Tower Top Interface	<i>\$20,000.00</i>	\$20,000.00	N/A	N/A	N/A

Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$11,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$140,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$534,330.00	\$251,800.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$2,740,768.25	\$2,150,238.25	N/A	\$26,953.25	N/A

### Components

Information not provided.



**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>Interim Transmission Line</b>	<b>\$127,800.00</b>	<b>\$121,500.00</b>		<b>\$0.00</b>	
Rigid Transmission Line - copper, 4 1/16"	\$127,800.00	\$121,500.00	N/A	N/A	N/A
<b>Primary Transmission Line</b>	<b>\$25,000.00</b>	<b>\$25,000.00</b>		<b>\$0.00</b>	
Retuning	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$152,800.00</b>	<b>\$146,500.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$2,740,768.25</b>	<b>\$2,150,238.25</b>	<b>N/A</b>	<b>\$26,953.25</b>	<b>N/A</b>

**Components**

Information not provided.

**Cost Information**

**Tower Equipment and Rigging Costs**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Tower TOWER</b>	<b>\$381,100.00</b>	<b>\$237,000.00</b>		<b>\$0.00</b>	
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$150,000.00	N/A	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$75,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$381,100.00</b>	<b>\$237,000.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$2,740,768.25</b>	<b>\$2,150,238.25</b>	<b>N/A</b>	<b>\$26,953.25</b>	<b>N/A</b>

**Components**

Information not provided.

**Cost Information**

**Outside Professional Services**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Outside Professional Services</b>	<b>\$68,548.25</b>	<b>\$48,493.25</b>		<b>\$23,203.25</b>	
Other Engineering Services	<i>\$3,931.25</i>	\$3,931.25	N/A	\$3,931.25	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	\$675.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$2,285.00	N/A
Project management of the transition	<i>\$15,487.00</i>	\$15,487.00	See attached / uploaded PDF files titled, "Osborn 39689 v210125pmv1; Osborn 40022 v210125pmv1, Osborn 40308 v210125pmv1, Osborn 40656 v210125pmv1 & Osborn 40961 v210125pmv1"	\$15,487.00	N/A
RF Exposure Measurements	\$21,050.00	\$10,000.00	N/A	N/A	N/A

Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$0.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$825.00	N/A	\$825.00	N/A
<b>Sub-total</b>	\$68,548.25	\$48,493.25	N/A	\$23,203.25	N/A
<b>Total for all systems</b>	\$2,740,768.25	\$2,150,238.25	N/A	\$26,953.25	N/A

## Components

Actual Information Description	File Name
Other Engineering Services	<p><b>Component Description:</b> Osborn 40022 v210125pmv1</p> <p><b>Amount:</b> \$466.25</p> <p><b>Component Description:</b> Osborn 39395 v210114pmv1</p> <p><b>Amount:</b> \$3,465.00</p>
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	<p><b>Component Description:</b> Osborn 39689 v210125pmv1</p> <p><b>Amount:</b> \$675.00</p>
Prepare and or review reimbursement form	<p><b>Component Description:</b> Osborn 40022 v210125pmv1</p> <p><b>Amount:</b> \$1,585.00</p> <p><b>Component Description:</b> Osborn 39689 v210125pmv1</p> <p><b>Amount:</b> \$25.00</p> <p><b>Component Description:</b> Osborn 40308 v210125pmv1</p> <p><b>Amount:</b> \$150.00</p> <p><b>Component Description:</b> Osborn 38633 v210114pmv1</p> <p><b>Amount:</b> \$275.00</p> <p><b>Component Description:</b> Osborn 39395 v210114pmv1</p> <p><b>Amount:</b> \$250.00</p>

Project management of the transition

**Component Description:** Osborn 40022  
v210125pmv1  
**Amount:** \$1,422.00

**Component Description:** Osborn 39689  
v210125pmv1  
**Amount:** \$2,923.00

**Component Description:** Osborn 39689  
v210125pmv1  
**Amount:** \$870.00

**Component Description:** Osborn 40961  
v210125pmv1  
**Amount:** \$869.00

**Component Description:** Osborn 40656  
v210125pmv1  
**Amount:** \$395.00

**Component Description:** Osborn 40308  
v210125pmv1  
**Amount:** \$948.00

**Component Description:** Osborn 38335  
v210114pmv1  
**Amount:** \$790.00

**Component Description:** Osborn 39009  
v210114pmv1  
**Amount:** \$1,659.00

**Component Description:** Osborn 39395  
v210114pmv1  
**Amount:** \$3,652.00

	<b>Component Description:</b> Osborn 38633 v210114pmv1 <b>Amount:</b> \$1,959.00
RF Exposure Measurements	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.
Perform engineering study for new channel assignment and antenna development	Information not provided.
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<b>Component Description:</b> Osborn 39395 v210114pmv1 <b>Amount:</b> \$825.00

**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>\$73,190.00</b>	<b>\$72,585.00</b>		<b>\$3,750.00</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>\$0.00</i>	\$0.00	N/A	N/A	N/A
Equipment Storage	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A
Local Zoning	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A
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	\$1,070.00	N/A	N/A	N/A



DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$3,750.00	N/A
<b>Sub-total</b>	\$73,190.00	\$72,585.00	N/A	\$3,750.00	N/A
<b>Total for all systems</b>	\$2,740,768.25	\$2,150,238.25	N/A	\$26,953.25	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.
Local Zoning	Information not provided.
FCC Filing Fees - Special Temporary Authorization request	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	Information not provided.
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.
DTV Medical Facility Notification	<p><b>Component Description:</b> RF Notifs 1438 v200721gv1</p> <p><b>Amount:</b> \$3,750.00</p>

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

	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>	<b>Actual Cost</b>
<b>Total for all systems</b>	\$2,740,768.25	\$2,150,238.25	\$26,953.25

**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
	<p><b>Submission of Estimated Expenses Statements</b></p>	<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 data-bbox="758 772 1053 1176">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 data-bbox="758 1198 1037 1444">2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li data-bbox="758 1467 1045 1747">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*

01/26/2021

Certification	Section	Question	Response
	<p><b>Submission of Actual Cost Documentation Statements</b></p>	<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.

<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Jeffrey C Gehman</b>  <i>Engineering Associate</i></p> <p>01/26/2021</p>

**Attachments**