



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **70423** | Service: **DCA** | Call **WUBX-CD** | Channel: **24 (UHF)** |
ID:
File **0000027573**
Number:
FRN: **0014037857** | Date **07/13**
Submitted: **/2021**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|---|--|----------------------|------------------------------|---------------------------------|
| L4 MEDIA GROUP, LLC Doing Business As: L4 MEDIA GROUP, LLC | PO Box 60606 Suite 2450 Chicago, IL 60606 United States | +1 (612) 202-4980 | ssaldana@sktytrading. 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 |
|---|---|-----------------------|----------------------------------|
| Tim Wolak <i>Director</i> <i>Banded IT</i> <i>Solutions</i> | 2425 Bentshire Dr Jacksonville, FL 32246 United States | +1 (312) 213- 7895 | twolak@bandeditsolutions. 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 | Current transmission system consists of a single transmitter feeding a flexible transmission line which connects to an antenna on the tower. Work includes tower study/rehabilitation to support new antenna, mounting antenna and retuning transmitter. |

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 | 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 | Elettronika |
| | Model | TXUD2000 |

| | |
|----------------------------|-------------|
| Year | 2015 |
| Type | Solid State |
| Solid State Cooling | Air Cooled |
| Solid State Power capacity | 2.0 kW |

Primary Transmitter

Retuning Transmitter Costs

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

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 | No |
| | Description | N/A |
| HVAC Service | Does the replacement transmitter require HVAC Service? | No |
| | Type | N/A |
| | | |

| | | |
|--|---|-----|
| | Size | N/A |
| | Other Size | N/A |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leasehold improvement? | No |
| | Size | N/A |
| Channel 14 Costs | Is an RF Consulting Engineer needed? | N/A |
| | Is a channel 14 Mask Filer needed? | N/A |
| | Is additional field engineering time needed? | N/A |
| | Number of Days | N/A |

Primary Transmitter **Other Transmitter Cost Not Listed**
Information not provided.

Antennas

| Section | Question | Response |
|--------------------------|---------------------------------------|----------|
| Antenna Related Expenses | Do you have antenna related expenses? | Yes |

**Primary
Antenna**

Existing Antenna Information

| Section | Question | Response |
|---|--|---------------------------------------|
| Existing Antenna Description | Type of change | Purchase New |
| | Antenna Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is the existing antenna shared with another station or stations? | No |
| | Is the existing antenna directional? | Yes |
| | Is antenna in operating condition? | Yes |
| | Is antenna located on or in close proximity to an antenna farm? | No |
| Existing Antenna Manufacturer and Type | Class | Class A |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | Type | Other |
| | 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 | UHF-TV LOG- PERIODIC ANTENNA |
| | | |

| | |
|--|----------|
| ERP: (Effective Radiated Power) | 6.5 kW |
| Manufacturer | |
| Model | CL-1469B |
| Year | 2015 |

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 | Horizontal |
| | Type | Broadband Panel |
| | Number of Stations Supported | 1 |
| | Number of Panels/Bays | 1 |
| | Lower Limit | 470.00 MHz |
| | Upper Limit | 860.00 MHz |
| | Design power capacity in use | 100.0 % |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 5.52 kW |
| | Manufacturer | |
| | | |

| | |
|-------------------------------|--|
| Model | TUA-C1-01 /01M-T |
| Year | 2017 |
| Justification for New Antenna | Applicant is proposing to replace the current antenna with one that has a similar pattern and will work on the repack channel. |

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? | No |

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) | No |
| | Others Types of Users | Yes |
| | Is tower documented for structural analysis? | Unknown |
| | Is tower compliant with Rev G? | Unknown |
| Existing Tower Structure Registration | Do you have a tower registration number? | Yes |
| | ASR Number | 1007971 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 36° 03' 55.1" N- |
| | Longitude (NAD83) | 078° 53' 24.0" W- |

| | |
|--|--|
| Overall Structure Height | 320.86 feet |
| Support Structure Height | 299.87 feet |
| Ground Elevation Above Mean Sea Level (AMSL) | 391.07 feet |
| Structure Type | TOWER - Free Standing or Guyed Structure |
| Tower Owner | Pinnacle Towers LLC |
| Date Constructed | 03/01/1985 |

Other Types of Users

Users

Cellular

Primary Tower

Tower Modification Costs

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

Primary Tower

Tower Rigging Costs

| Section | Question | Response |
|---------------------|---------------|----------|
| Tower Rigging Costs | Complex Tower | N/A |

| | | |
|---|-----------------------------------|----|
| Helicopter Services Required | Are helicopter services required? | No |
|---|-----------------------------------|----|

**Primary
Tower**

Other Tower Expenses Not Listed

Information not provided.

**Outside
Professional Services Costs**

| Section | Question | Response |
|---|--|--|
| Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 200 |
| | Explanation | Applicant has no internal resources capable of overseeing, identifying, purchasing, installing and commissioning this repack project. It will rely solely on outside services to manage all work required. |
| Outside RF consulting Engineering Services | Perform engineering study for new channel assignment and antenna development | Yes |
| | Prepare engineering section of Form FCC Construction Permit Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare engineering section of Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary Authority | No |
| | Quantity | N/A |
| | Do you have Distributed Transmission System engineering services? | N/A |
| | Critical Facility | N/A |
| | | |

| | | |
|---|--|-----|
| | Terrain-Shielded Facility | N/A |
| Attorney and Other Outside Consulting Services | Prepare and file Form FCC Construction Permit Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare and file Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary Authority | No |
| | Quantity | N/A |
| | NEPA Section 106 environmental review | No |
| | Environmental Assessment | No |
| | ASR Modification | No |
| | FAA Consultation (including preparation of FAA Form 7460) | No |
| | Negotiation of Lease and other Matter for Shared Locations | No |
| RF Field Engineering Services | Prepare or Review FCC Form 399 for Reimbursement | Yes |
| | Address transition timing and coordination issues w/ other stations and wireless providers | No |
| | Comprehensive coverage verification via field study | Yes |
| | RF exposure measurements | No |
| | Additional Field Engineering Service | No |
| | Number of Days | N/A |
| | Justification | N/A |

**Outside
Professional** **Other Professional Services Expenses Not Listed**

| Services Costs | |
|-------------------------------------|---|
| Name | Description |
| MSW reports | MSW technical services to prepare FCC post-repack reports. |
| Progress Reporting | Prepare and file 10 required progress reports on FCC Form 2100, Schedule 387 on a quarterly basis with the FCC. |
| Fletcher, Heald and Hildreth | FCC Attorney fees for repack, planning and filling |

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 | Yes |
| | 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? | No |

| | |
|-----------------------|---|
| 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 |
|-------------------------------------|-----------------------------|---------------------|-----------------------------------|---------------------|-----------------------------------|
| Primary Transmitter TXUD2000 | \$109,355.00 | \$19,340.00 | | \$19,340.00 | |
| 3 kW mask filter | \$4,155.00 | \$4,340.00 | THE INITIAL ESTIMATE WAS OUTDATED | \$4,340.00 | THE INITIAL ESTIMATE WAS OUTDATED |
| UHF and VHF - minor banding issues | \$105,200.00 | \$15,000.00 | N/A | \$15,000.00 | N/A |
| Sub-total | \$109,355.00 | \$19,340.00 | N/A | \$19,340.00 | N/A |
| Total for all systems | \$603,830.00 | \$420,100.75 | N/A | \$117,425.12 | N/A |

Components

| Actual Information | |
|--------------------|---|
| Description | File Name |
| 3 kW mask filter | <p>Component Description: DELTA DTV FILTER Part # 1604-8-2N UHF 8 cavities, Power 2.7 KW RMS full service mask filter</p> <p>Amount: \$4,340.00</p> |

| | | | | | |
|---------------------------------------|--|-------------------------------|-------------------------------|----------------|-------------|
| UHF and VHF - minor banding issues | <table><tr><td data-bbox="724 174 1034 210">Component Description:</td><td data-bbox="1168 174 1374 244">transmitter retune service</td></tr><tr><td data-bbox="724 255 834 291">Amount:</td><td data-bbox="1168 255 1300 291">\$15,000.00</td></tr></table> | Component Description: | transmitter retune service | Amount: | \$15,000.00 |
| Component Description: | transmitter retune service | | | | |
| Amount: | \$15,000.00 | | | | |

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 TUA-C1-01 /01M-T | \$34,290.00 | \$30,700.00 | | \$4,500.00 | |
| UHF - Lower Power Side Mount, Class A broadband panel (cost per panel) | \$1,260.00 | \$1,200.00 | N/A | N/A | N/A |
| UHF - Lower Power Side Mount, Class A One Station antenna -- basic | \$26,300.00 | \$25,000.00 | N/A | N/A | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$4,500.00 | N/A | \$4,500.00 | N/A |
| Sub-total | \$34,290.00 | \$30,700.00 | N/A | \$4,500.00 | N/A |
| Total for all systems | \$603,830.00 | \$420,100.75 | N/A | \$117,425.12 | N/A |

Components

| Actual Information | |
|--|---------------------------|
| Description | File Name |
| UHF - Lower Power Side Mount, Class A broadband panel (cost per panel) | Information not provided. |

| | | | | | |
|--|--|-------------------------------|------------|----------------|------------|
| UHF - Lower Power Side Mount, Class A One Station antenna -- basic | Information not provided. | | | | |
| Sweep test of existing antenna | <table><tr><td>Component Description:</td><td>SWEEP TEST</td></tr><tr><td>Amount:</td><td>\$4,500.00</td></tr></table> | Component Description: | SWEEP TEST | Amount: | \$4,500.00 |
| Component Description: | SWEEP TEST | | | | |
| Amount: | \$4,500.00 | | | | |

Cost Information **Transmission Line**
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 |
|--|-----------------------------|----------------|------------------------------|--------------|---------------------------|
| Primary Tower TOWER | \$268,500.00 | \$238,000.00 | | \$5,700.00 | |
| Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study | \$26,300.00 | \$25,000.00 | N/A | \$5,700.00 | N/A |
| Short Tower (less than 500') | \$84,200.00 | \$63,000.00 | N/A | N/A | N/A |
| Minor tower reinforcement /modifications | \$158,000.00 | \$150,000.00 | N/A | N/A | N/A |
| Sub-total | \$268,500.00 | \$238,000.00 | N/A | \$5,700.00 | N/A |
| Total for all systems | \$603,830.00 | \$420,100.75 | N/A | \$117,425.12 | N/A |

Components

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

| | | | | | | | | | | | | | |
|---|--|-------------------------------|--|----------------|------------|-------------------------------|---------------------|----------------|------------|-------------------------------|--|----------------|------------|
| Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study | <table> <tr> <td data-bbox="694 168 1005 212">Component Description:</td><td data-bbox="1133 168 1372 324">PERMIT APPLICATION AND CONSTRUCTION DOCS</td></tr> <tr> <td data-bbox="694 324 1005 369">Amount:</td><td data-bbox="1133 324 1372 369">\$5,700.00</td></tr> <tr> <td data-bbox="694 470 1005 515">Component Description:</td><td data-bbox="1133 470 1372 515">ATC application fee</td></tr> <tr> <td data-bbox="694 515 1005 560">Amount:</td><td data-bbox="1133 515 1372 560">\$4,920.00</td></tr> <tr> <td data-bbox="694 649 1005 694">Component Description:</td><td data-bbox="1133 649 1372 772">Structural engineering, prorated portion</td></tr> <tr> <td data-bbox="694 772 1005 817">Amount:</td><td data-bbox="1133 772 1372 817">\$1,500.00</td></tr> </table> | Component Description: | PERMIT APPLICATION AND CONSTRUCTION DOCS | Amount: | \$5,700.00 | Component Description: | ATC application fee | Amount: | \$4,920.00 | Component Description: | Structural engineering, prorated portion | Amount: | \$1,500.00 |
| Component Description: | PERMIT APPLICATION AND CONSTRUCTION DOCS | | | | | | | | | | | | |
| Amount: | \$5,700.00 | | | | | | | | | | | | |
| Component Description: | ATC application fee | | | | | | | | | | | | |
| Amount: | \$4,920.00 | | | | | | | | | | | | |
| Component Description: | Structural engineering, prorated portion | | | | | | | | | | | | |
| Amount: | \$1,500.00 | | | | | | | | | | | | |
| Short Tower (less than 500') | Information not provided. | | | | | | | | | | | | |
| Minor tower reinforcement /modifications | 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 |
|--|-----------------------------|---------------------|--|--------------------|---|
| Outside Professional Services | \$164,800.00 | \$110,553.75 | | \$81,378.12 | |
| Fletcher, Heald and Hildreth | <i>\$5,000.00</i> | \$5,000.00 | N/A | \$3,040.82 | N/A |
| Comprehensive coverage verification via field study, if needed | \$84,200.00 | \$30,000.00 | See attached QUOTE 598, WUBX L4, 030120 REPACK FIELD TESTING | \$30,000.00 | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application | \$2,365.00 | \$2,250.00 | N/A | \$582.30 | N/A |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,180.00 | ACTUAL SERVICES EXCEEDED ESTIMATE | \$3,180.00 | The original estimate was based on the FCC menu, and missed the actual labor required to complete the task by \$180 |
| MSW reports | <i>\$1,650.00</i> | \$1,650.00 | N/A | \$861.25 | N/A |

| | | | | | |
|--|--------------------|-------------|--|------------|--|
| Progress Reporting | \$20,000.00 | \$20,000.00 | Prepare and file 10 required progress reports on FCC Form 2100, Schedule 387 on a quarterly basis with the FCC. | \$1,192.50 | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$5,000.00 | N/A | \$3,047.50 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$9,473.75 | Due to tower loading and congestion concerns we had to consider alternative antennas and mounting heights which necessitated additional studies. | \$9,473.75 | Conduct Study for Alternative Antenna, also, due to tower congestion and loading concerns Conduct Study, Prepare and File FCC CP Modification of Construction Permit form 2100 for change in antenna height on tower for WUBX-CD |

| | | | | | |
|---|--------------|--------------|-----|--------------|-----|
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | N/A | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | N/A | N/A |
| Project management of the transition | \$31,600.00 | \$30,000.00 | N/A | \$30,000.00 | N/A |
| Sub-total | \$164,800.00 | \$110,553.75 | N/A | \$81,378.12 | N/A |
| Total for all systems | \$603,830.00 | \$420,100.75 | N/A | \$117,425.12 | N/A |

Components

| Actual Information | | |
|------------------------------|-------------------------------|---|
| Description | File Name | |
| Fletcher, Heald and Hildreth | Component Description: | FCC Attorney Fees |
| | Amount: | \$333.33 |
| | Component Description: | corrected which stations were invoiced and corrected requested amounts. |
| | Amount: | \$116.45 |
| | Component Description: | FCC Attorney Fees |
| | Amount: | \$275.00 |
| | Component Description: | FCC Attorney Fees |
| | Amount: | \$214.58 |

| | |
|-------------------------------|------------------|
| Component Description: | Not reimbursable |
| Amount: | (\$100.00) |

| | |
|-------------------------------|---|
| Component Description: | Line was not reimbursable and are issuing a credit memo |
| Amount: | (\$7.08) |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$393.75 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$187.50 |

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|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$20.83 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$125.00 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$712.50 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$120.83 |

| | |
|-------------------------------|---|
| Component Description: | corrected which stations were invoiced and corrected requested amounts. |
| Amount: | \$66.67 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$62.50 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$62.50 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$195.00 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$92.71 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$208.33 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$51.04 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$204.17 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$100.00 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$68.75 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$395.83 |

| | |
|-------------------------------|-------------------|
| Component Description: | FCC Attorney Fees |
| Amount: | \$406.25 |

| | | |
|--|---|--|
| Comprehensive coverage verification via field study, if needed | Component Description: Amount: | FIELD TESTING \$30,000.00 |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Component Description: Amount: | Attorney fees \$582.30 |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Component Description: Amount: | WUBX-CD Durham, NC Prepare technical portions of FCC Form 2100 Construction Permit Application and Engineering Exhibits required to be filed with initial repack Construction Permit Application - filing window. 12.0 hours \$3,180.00 |
| MSW reports | Component Description: Amount: | Technical services to prepare and file forms 399,387 and temporary authority application. \$861.25 |
| Progress Reporting | Component Description: Amount: | Prepare FCC Form 387 Repack Progress Report Filing. WUBX-CD \$1,192.50 |

| | | | | | | | | | |
|---|--|-------------------------------|---|----------------|------------|-------------------------------|---|----------------|------------|
| <p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p> | <table> <tr> <td data-bbox="695 98 1114 824">Component Description:</td><td data-bbox="1137 98 1426 824">WUBX-CD Durham, NC Prepare initial budgets, equipment list, and determine equipment replacements for new repack channel; Prepare FCC Form 2100 Schedule 399 Budget and Narrative for filing in initial CP Filing Window. 11.5 hours</td></tr> <tr> <td data-bbox="695 824 1114 824">Amount:</td><td data-bbox="1137 824 1426 824">\$3,047.50</td></tr> </table> | Component Description: | WUBX-CD Durham, NC Prepare initial budgets, equipment list, and determine equipment replacements for new repack channel; Prepare FCC Form 2100 Schedule 399 Budget and Narrative for filing in initial CP Filing Window. 11.5 hours | Amount: | \$3,047.50 | | | | |
| Component Description: | WUBX-CD Durham, NC Prepare initial budgets, equipment list, and determine equipment replacements for new repack channel; Prepare FCC Form 2100 Schedule 399 Budget and Narrative for filing in initial CP Filing Window. 11.5 hours | | | | | | | | |
| Amount: | \$3,047.50 | | | | | | | | |
| <p>Perform engineering study for new channel assignment and antenna development</p> | <table> <tr> <td data-bbox="695 835 1114 1406">Component Description:</td><td data-bbox="1137 835 1426 1406">WUBX-CD Durham, NC Conduct TVStudy analysis of initial channel assignment and analyze interference issues with new repack channel assignment. 17.25 hours</td></tr> <tr> <td data-bbox="695 1406 1114 1406">Amount:</td><td data-bbox="1137 1406 1426 1406">\$6,360.00</td></tr> <tr> <td data-bbox="695 1417 1114 2134">Component Description:</td><td data-bbox="1137 1417 1426 2134">Conduct Study for Alternative Antenna; Prepare and File FCC Modification of Construction Permit form 2100; Prepare TPO & Tech Summary Calculations for WUBX-CD Durham, NC</td></tr> <tr> <td data-bbox="695 2134 1114 2134">Amount:</td><td data-bbox="1137 2134 1426 2134">\$1,192.50</td></tr> </table> | Component Description: | WUBX-CD Durham, NC Conduct TVStudy analysis of initial channel assignment and analyze interference issues with new repack channel assignment. 17.25 hours | Amount: | \$6,360.00 | Component Description: | Conduct Study for Alternative Antenna; Prepare and File FCC Modification of Construction Permit form 2100; Prepare TPO & Tech Summary Calculations for WUBX-CD Durham, NC | Amount: | \$1,192.50 |
| Component Description: | WUBX-CD Durham, NC Conduct TVStudy analysis of initial channel assignment and analyze interference issues with new repack channel assignment. 17.25 hours | | | | | | | | |
| Amount: | \$6,360.00 | | | | | | | | |
| Component Description: | Conduct Study for Alternative Antenna; Prepare and File FCC Modification of Construction Permit form 2100; Prepare TPO & Tech Summary Calculations for WUBX-CD Durham, NC | | | | | | | | |
| Amount: | \$1,192.50 | | | | | | | | |

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| | <p>Component Description: - Analyze potential early transition for WUBX-CD</p> <p>Amount: \$662.50</p> |
| | <p>Component Description: WUBX-CD Durham, NC Develop azimuth antenna pattern and determine antenna required for FCC Form 2100 Construction Permit Application for initial Repack Channel CP filing. 6.75 hours</p> <p>Amount: \$1.00</p> |
| | <p>Component Description: Conduct Study, Prepare and File FCC CP Modification of Construction Permit form 2100 for change in antenna height on tower for WUBX-CD</p> <p>Amount: \$1,258.75</p> |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Prepare and or review reimbursement form | Information not provided. |
| Project management of the transition | |

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| Component Description: | Project Management services, research and coordination w /rf engineering, equipment vendors and site owners |
| Amount: | \$1,500.00 |

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| Component Description: | PROJECT MANAGEMENT SERVICES |
| Amount: | \$3,750.00 |

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| Component Description: | PROJECT MANAGEMENT |
| Amount: | \$2,250.00 |

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|-------------------------------|-----------------------------|
| Component Description: | PROJECT MANAGEMENT SERVICES |
| Amount: | \$3,000.00 |

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| Component Description: | REPACK PROJECT MANAGEMENT SERVICES. RESEARCH AND COORDINATION W /RF ENGINEERING, ATTORNEY, EQUIPMENT VENDORS AND SITE OWNER |
| Amount: | \$1,500.00 |

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| Component Description: | PROJECT MANAGEMENT |
| Amount: | \$3,000.00 |

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| Component Description: | Project Management services, planning and coordination |
| Amount: | \$1,500.00 |

| | |
|-------------------------------|---|
| Component Description: | Project Management services, research and coordination w /rf engineering, equipment vendors and site owners |
| Amount: | \$2,250.00 |

| | |
|-------------------------------|---|
| Component Description: | Project Management services, research and coordination w /rf engineering, equipment vendors and site owners |
| Amount: | \$2,250.00 |

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|-------------------------------|-----------------------------|
| Component Description: | PROJECT MANAGEMENT SERVICES |
| Amount: | \$3,000.00 |

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| Component Description: | PROJECT MANAGEMENT |
| Amount: | \$3,750.00 |

| | |
|-------------------------------|---|
| Component Description: | Project Management services, research and coordination w /rf engineering, equipment vendors and site owners |
| Amount: | \$1,500.00 |

Component Description:

Project
management, lease
modification and
installation planning

Amount:

\$750.00

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 |
|---|-----------------------------|--------------------|---|-------------------|---------------------------|
| Other Expenses | \$26,885.00 | \$21,507.00 | | \$6,507.00 | |
| Develop and air announcement of upcoming channel change | <i>\$2,500.00</i> | \$2,500.00 | It is required that the applicant give notification to viewers of the repack channel change. Applicant has limited internal resources to create and produce such notifications and will most likely have to obtain the services from an outside vendor. | N/A | N/A |
| Equipment Storage | <i>\$2,500.00</i> | \$2,500.00 | Applicant may receive antenna and transmitter parts prior to set installation dates. There is no on-site storage available and applicant may be forced to use outside temporary storage facilities. | N/A | N/A |

| | | | | | |
|--|-------------------|------------|---|----------|-----|
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$335.00 | FCC APPARENTLY INCREASED THE PRICE | \$335.00 | N/A |
| Equipment Delivery and Handling Charges | \$5,000.00 | \$5,000.00 | It is possible other unknown expenses may arise that are not identified on this budget submission. The amount proposed is less than 3% of the total project cost to cover such contingencies. | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | \$1,000.00 | \$1,000.00 | Applicant will be required to dispose of the current pre-repack antenna and parts that were replaced for transmitter retuning. The exact costs are not known at this time. | N/A | N/A |

| | | | | | |
|-----------------------------------|-------------------|--------------|--|--------------|-------------------------------------|
| Non-zoning permits | \$2,000.00 | \$2,000.00 | It is currently unknown what the city or county may levy on applicant in terms of a building permit to perform the tower work required. It is felt this estimate should cover the associated costs for any required permits. | N/A | N/A |
| Local Zoning | \$2,000.00 | \$2,000.00 | It is currently unknown what the local zoning authority or city /county may levy on applicant to perform the tower work required. It is felt this estimate should cover the associated costs for any required permits. | N/A | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$6,172.00 | The original estimate was outdated | \$6,172.00 | The initial estimated was outdated. |
| Sub-total | \$26,885.00 | \$21,507.00 | N/A | \$6,507.00 | N/A |
| Total for all systems | \$603,830.00 | \$420,100.75 | N/A | \$117,425.12 | N/A |

Components

| Actual Information | |
|--|--|
| Description | File Name |
| Develop and air announcement of upcoming channel change | Information not provided. |
| Equipment Storage | Information not provided. |
| FCC Filing Fees - Form 2100 license to cover application | Component Description: license fee Amount: \$335.00 |
| Equipment Delivery and Handling Charges | Information not provided. |
| Disposal Costs (for equipment and other waste, net of any salvage value) | Information not provided. |
| Non-zoning permits | Information not provided. |
| Local Zoning | Information not provided. |
| DTV Medical Facility Notification | Component Description: DTV Notification Service: Notification of Medical Facilities Transmitter Medical Facility Notification per proposal Amount: \$6,172.00 |

| | | | |
|-----------------------------|------------------------------|--|-----------------------|
| Cost Information | Grand Total | | |
| | | Predetermined Cost Estimate | Estimated Cost |
| | | | Actual Cost |
| | Total for all systems | \$603,830.00 | \$420,100.75 |
| | | | \$117,425.12 |

| | | |
|-----------------------------|--|-----------------|
| Reimbursement Status | Question | Response |
| | The facility has ceased operating on its pre-auction channel. | Yes |
| | Construction of final facilities or all necessary modifications are complete. | Yes |
| | All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator. | No |

| Certification | Section | Question | Response |
|---------------|---|---|----------|
| | Submission of Estimated Expenses Statements | <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>Tim Wolak <i>Director</i> 07/13/2021</p> |

| Certification | Section | Question | Response |
|---------------|--|--|----------|
| | Submission of Actual Cost Documentation Statements | <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"> 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.

| | |
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| <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>Tim Wolak <i>Director</i></p> <p>07/13/2021</p> |

| Certification | Section | Question | Response |
|---------------|---|--|----------|
| | Submission of Final Allocation or Accounting Information 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 and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 2. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. | |

3. The above-named entity certifies that all costs identified as "actual costs" herein accurately represent the costs actually paid by the above-named entity, including any discounts, refunds, or rebates.
4. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
6. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

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

Tim Wolak
Director

07/13/2021

Attachments

