Approved by OMB (Office of Management and Budget) 3060-1178

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility ID: **63867** | Service: **DTV** | Call Sign: **WSST-TV** | Channel: **34 (UHF)**

File Number: **0000025423**

FRN: **0024469108** | Date Submitted: **07/29/2021**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
MARQUEE BROADCASTING GEORGIA, INC. Doing Business As: Marquee Broadcasting Georgia, Inc.	Patricia Lane 202 Downtown Plaza PO Box 4009 Salisbury, GA 21803 United States	+1 (410) 742-4747	patricia_lane@marqueebroadcasting.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
Samuel Hariton *Widelity*	Samuel Hariton 4031 University Drive Ste. Fairfax, VA 22030 United States	+1 (339) 222-8107	sam.hariton@widelity.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	WSST-TV is in Phase 1. It will lower its existing antenna to operate Channel 22 on an interim basis while Channel 34 is constructed. It then cut-over to Channel 34 when the phase construction is completed. See attached for details.

Transmitters

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

Primary Transmitter

Add 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	UAXT-6R37
	Year	2016
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	5.4 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-8R44
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	4.8 kW
	Justification for New Transmitter	To continue to serve the public during the transition, WSST needs to continue to operate on Ch 22 with its existing transmitter /antenna combination until the Ch 34 antenna is installed on the tower and connected to the Ch 34 transmitter. See attached.

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 leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

Primary Transmitter

Other Transmitter Cost Not Listed

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?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	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)	80.0 kW

Manufacturer	
Model	ALP-24L3-HSO-22
Year	2016

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?	No
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	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)	80.0 kW
	Manufacturer	

	Model	ALP24M3-HSO-34
	Year	2017
	Justification for New Antenna	Existing antenna does not work on the new channel.

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
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	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	Commscope
	Type	Flexible Air
	Diameter	3 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	466 feet per run

Primary Transmission Line

Other Transmission Line Expenses Not Listed

Name	Description
Required Category	Used to remove error

Interim Transmission Line

New Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Flexible Air
	Diameter	1 5/8 inches
	Segment Length	N/A
	Other Segment Length	
	Number of parallel runs	1
	Length	450 feet per run

	Justification for New Transmission Line	Per the transition plan, a transmission line is needed to feed the existing Channel 22 antenna, which will be lowered on the tower to allow for installation of the new Channel 34 antenna. See attached transition plan.

Interim Transmission Line

Other Transmission Line Expenses Not Listed

Name	Description
Interim Transmission Line - Additional Parts	Additional parts required for interim antenna operation

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

Add 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?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1025900
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	31° 53' 36.0" N-
	Longitude (NAD83)	083° 48' 18.0" W-
	Overall Structure Height	423.88 feet
	Support Structure Height	419.94 feet
	Ground Elevation Above Mean Sea Level (AMSL)	297.90 feet
	Structure Type	TOWER - Free Standing or Guyed Structure

Tower Owner	SUNBELT SOUTH TELE-COMMUNICATIONS, LTD.
Date Constructed	03/01/1989

Primary Tower

Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	No study needed
Tower Reinforcements	Please select whether tower reinforcements are needed:	No 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	711
	Explanation	WSST-TV requires the aid of outside project management services in order to fulfill the requirements of the repack. WSST-TV does not have sufficient resource capacity and expertise necessary to facility on-time completion of the station's build.
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes

	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	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	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	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	No

RF exposure measurements	No
Additional Field Engineering Service	No
Number of Days	N/A
Justification	N/A

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Information not provided.

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	No
	Non-zoning permits	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	No
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
	Does this relocation require Equipment Storage?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	No
	Does this relocation require MVPD Notification of a Channel Change?	No

Other Expenses

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 UAXTE-8R44	**$236,500.00**	**$182,560.38**		**$182,560.37**	
UHF - Air Cooled Solid State Transmitter 4 - 6 kW	$236,500.00	$182,560.38	see Estimated Cost Justification WSST-110-1st Primary Transmitter - UHF Air-Cooled Solid State, 4-6 kW v0	$182,560.37	N/A
Sub-total	$236,500.00	$182,560.38	N/A	$182,560.37	N/A
Total for all systems	$766,798.53	$509,361.84	N/A	$335,973.20	N/A

Components

Actual Information Description	File Name

UHF - Air Cooled Solid State Transmitter 4 - 6 kW	**Component Description:**	UAXTE-8R44 Transmitter per Quote GA-00022167
	Amount:	$13,756.09
	Component Description:	One third downpayment of new transmitter necessary to complete Phase 1 relocation to accommodate repack.
	Amount:	$55,770.57
	Component Description:	Third and final installment for transmitter
	Amount:	$57,263.14
	Component Description:	This is the second 1/3 payment due prior to shipping.
	Amount:	$55,770.57

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 ALP24M3-HSO-34	**$274,930.00**	**$90,744.28**		**$87,619.28**	
UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized	$89,400.00	$5,915.02	***System Notice: Estimate adjusted and locked because line has been superseded. ***	$5,915.02	N/A
Sweep test of existing antenna	$6,730.00	$6,250.00	N/A	$3,125.00	N/A
UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized	$89,400.00	$56,672.63	***System Notice: Estimate adjusted and locked because line has been superseded. ***	$56,672.63	N/A

UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized	$89,400.00	$21,906.63	***System Notice: Estimate adjusted and locked because line has been superseded. ***	$21,906.63	N/A
Sub-total	$274,930.00	$90,744.28	N/A	$87,619.28	N/A
Total for all systems	$766,798.53	$509,361.84	N/A	$335,973.20	N/A

Components

Actual Information Description	File Name	
UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized	**Component Description:** **Amount:**	Final 10% for completion of installation PLUS $1,006.03 for additional parts, $91.93 for Sales Tax and $143.06 for freight $5,915.02
Sweep test of existing antenna	**Component Description:** **Amount:**	50% of system sweep cost $3,125.00
UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized	**Component Description:** **Amount:**	WSST-002 invoice amount. Purchase order plus invoice attached. $56,672.63

UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized	**Component Description:** **Amount:**	50% deposit of price for antenna (ALP24M#-HSO-34) $21,906.63

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
Interim Transmission Line	**$14,930.53**	**$14,030.53**		**$5,738.80**	
Interim Transmission Line - Additional Parts	***$80.53***	$80.53	Please see WSST Interim Transmission Line - Additional Parts Budget Revision Justification Letter	$80.53	N/A
Flexible Air Transmission Line - dielectric, 1 5 /8"	$14,850.00	$13,950.00	N/A	$5,658.27	N/A
Primary Transmission Line	**$0.00**	**$0.00**		**$0.00**	
Required Category	***$0.00***	$0.00	Category required due to LMS functionality.	N/A	N/A
Sub-total	$14,930.53	$14,030.53	N/A	$5,738.80	N/A
Total for all systems	$766,798.53	$509,361.84	N/A	$335,973.20	N/A

Components

Actual Information Description	File Name

Interim Transmission Line - Additional Parts	**Component Description:** **Amount:**	Additional Parts $80.53
Flexible Air Transmission Line - dielectric, 1 5/8"	**Component Description:** **Amount:**	50% downpayment for cost of transmission line system identified in ERI invoice. $5,658.27
	Component Description: **Amount:**	Invoice moved to correct budget category. N/A
Required Category	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	**$84,200.00**	**$80,000.00**		**$20,245.00**	
Short Tower (less than 500')	$84,200.00	$80,000.00	N/A	$20,245.00	N/A
Sub-total	$84,200.00	$80,000.00	N/A	$20,245.00	N/A
Total for all systems	$766,798.53	$509,361.84	N/A	$335,973.20	N/A

Components

Actual Information Description	File Name	
Short Tower (less than 500')	**Component Description:**	50% downpayment for installation services - primary and interim
	Amount:	$20,245.00

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	**$143,048.00**	**$138,176.65**		**$37,544.75**	
Attorney Fees - Prepare and File request for Special Temporary Authorization	$3,680.00	$3,500.00	N/A	$0.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	$2,365.00	$2,250.00	N/A	$0.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	$5,260.00	$5,000.00	N/A	$465.00	N/A
Prepare request for Special Temporary Authorization	$2,050.00	$1,500.00	N/A	$0.00	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	$1,580.00	$1,500.00	N/A	$0.00	N/A

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	$3,155.00	$3,000.00	N/A	$2,000.00	N/A
Prepare and or review reimbursement form	$2,630.00	$3,776.65	The estimated cost has been adjusted to include all invoices submitted for reimbursement at this time.	$3,776.65	N/A
Address transition timing and coordination issues w/ other stations and wireless	$2,630.00	$2,500.00	N/A	$1,450.00	N/A
Perform engineering study for new channel assignment and antenna development	$7,360.00	$7,000.00	N/A	$0.00	N/A
Project management of the transition	$112,338.00	$108,150.00	Please see attached Widelity Strategic Support Quote	$29,853.10	N/A
Sub-total	$143,048.00	$138,176.65	N/A	$37,544.75	N/A
Total for all systems	$766,798.53	$509,361.84	N/A	$335,973.20	N/A

Components

Actual Information Description	File Name

Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	**Component Description:** This is the portion of the invoice attributable to the preparation of the repack construction permit. The remainder will be requested in the Form 399 reimbursement element. **Amount:** $300.00 **Component Description:** Legal Services **Amount:** $2,500.00 **Component Description:** Invoice moved to correct budget category. **Amount:** N/A **Component Description:** Legal fees for assisting client in preparing repack construction permit **Amount:** $165.00
Prepare request for Special Temporary Authorization	Information not provided.

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	**Component Description:** Invoice already paid in full by Licensee **Amount:** $1,000.00 **Component Description:** Form 2100 prep including antenna system design and completing application **Amount:** $2,000.00
Prepare and or review reimbursement form	**Component Description:** Legal **Amount:** $45.00 **Component Description:** Legal services relating to completion of reimbursement form. **Amount:** $435.00 **Component Description:** Invoice related to preparation of the reimbursement form **Amount:** $630.00 **Component Description:** Legal services attributable to the preparation of the reimbursement form. **Amount:** $555.00

Component Description:	This is the amount of the invoice attributable to work related to preparation of the reimbursement form. The invoice has been noted accordingly for your convenience.
Amount:	$270.00
Component Description:	This is the portion of this invoice related to preparation of the reimbursement form included postage costs of $6.65
Amount:	$1,056.65
Component Description:	This is the portion of the invoice related to legal services related to the preparation of the reimbursement form.
Amount:	$165.00
Component Description:	This is the amount of the invoice attributable to the preparation of the reimbursement form as notated on the invoice.
Amount:	$395.00

	Component Description:	Portion of invoice for legal services relating to the filing of quarterly progress report.
	Amount:	$225.00
Address transition timing and coordination issues w/ other stations and wireless	**Component Description:**	Telecons and correspondence by engineer to assist with transition plan
	Amount:	$1,000.00
	Component Description:	Portion of the invoice for legal services relating to the preparation and filing of the quarterly progress report.
	Amount:	$225.00
	Component Description:	Portion of the invoice related to preparation of quarterly progress reports.
	Amount:	$105.00
	Component Description:	Legal services related to filing progress report with FCC
	Amount:	$225.00

Perform engineering study for new channel assignment and antenna development	**Component Description:**	Engineering study for new channel assignment including interference and maximization potential. REVISED DESCRIPTION.
	Amount:	$500.00
	Component Description:	Licensee has already paid invoice in full
	Amount:	$2,000.00
Project management of the transition	**Component Description:**	Project Management
	Amount:	$1,875.60
	Component Description:	Project Management
	Amount:	$133.85
	Component Description:	Project Management
	Amount:	$1,881.10
	Component Description:	Project Management
	Amount:	$18.85
	Component Description:	Project Management
	Amount:	$2,377.40

Component Description: Project Management
Amount: $141.05

Component Description: Project Management
Amount: $101.25

Component Description: Project Management
Amount: $4,929.70

Component Description: Project Management
Amount: $28.75

Component Description: Project Management
Amount: $220.10

Component Description: Project Management
Amount: $2,416.30

Component Description: Project Management
Amount: $65.00

Component Description: Project Management
Amount: $1,841.40

Component Description: Project Management
Amount: $552.85

Component Description:	Project Management
Amount:	$1,911.15
Component Description:	Project Management
Amount:	$3,904.05
Component Description:	Project Management
Amount:	$193.75
Component Description:	Project Management
Amount:	$367.50
Component Description:	Project Management
Amount:	$156.55
Component Description:	Project Management
Amount:	$271.25
Component Description:	Project Management
Amount:	$3,444.15
Component Description:	Project Management
Amount:	$593.65
Component Description:	Project Management
Amount:	$2,427.85

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	**$13,190.00**	**$3,850.00**		**$2,265.00**	
FCC Filing Fees - Special Temporary Authorization request	$195.00	$190.00	N/A	$0.00	N/A
FCC Filing Fees - Form 2100 license to cover application	$335.00	$325.00	N/A	$0.00	N/A
DTV Medical Facility Notification	$11,550.00	$2,265.00	N/A	$2,265.00	You now have the ESTIMATE (EST-001339) for $2,265.00 and the PAID invoice (INV-001842) which demonstrates the estimate was spot on and the job is now done and paid for. WE ARE NOT SEEKING $4,530. Just the $2,265 that was estimated & now paid.

FCC Filing Fees - Form 2100 minor change CP application	$1,110.00	$1,070.00	N/A	$0.00	N/A
Sub-total	$13,190.00	$3,850.00	N/A	$2,265.00	N/A
Total for all systems	$766,798.53	$509,361.84	N/A	$335,973.20	N/A

Components

Actual Information Description	File Name
FCC Filing Fees - Special Temporary Authorization request	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	Information not provided.
DTV Medical Facility Notification	**Component Description:** We previously submitted the estimate and the invoice separately and now have placed both estimate and invoice in the single attachment. Hope this works. **Amount:** $2,265.00 **Component Description:** Cost to provide required notification to medical facilities. **Amount:** $2,265.00
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.

Cost Information

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	$766,798.53	$509,361.84	$335,973.20

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	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.	
	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.

	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.	**Ricky Smarr** *General Manager* 07/29/2021

Certification

Section	Question	Response
Submission of Actual Cost Documentation Statements	WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).	
	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.

	8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission. 9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.	
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	**Ricky Smarr** *General Manager* 07/29/2021

Certification

Section	Question	Response
Submission of Final Allocation or Accounting Information Statements	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.	
	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.	**Ricky Smarr** *General Manager* 07/29/2021

Attachments