



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **30601** | Service: **DTV** | Call **KHRR** | Channel: **16 (UHF)** |  
ID: | Sign:  
File **0000028472**  
Number:  
FRN: **0019509470** | Date **02/06**  
Submitted: **/2018**

## Applicant Information

### Applicant Name, Type, and Contact Information

| Applicant                       | Address                                                                                 | Phone                    | Email                             | Applicant Type                  |
|---------------------------------|-----------------------------------------------------------------------------------------|--------------------------|-----------------------------------|---------------------------------|
| NBC<br>TELEMUNDO<br>LICENSE LLC | 300 NEW<br>JERSEY AVE,<br>N.W.<br>SUITE 700<br>WASHINGTON,<br>DC 20001<br>United States | +1 (202)<br>524-<br>6401 | MARGARET.<br>TOBEY@NBCUNI.<br>COM | Limited<br>Liability<br>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 |
|----------------------------------------------------|---------|-------|-------|
| The Preparer is same as the reimbursement contact. |         |       |       |

## Broadcaster Information and Transition Plan

| Question | Response |
|----------|----------|
|----------|----------|

|                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information. | Yes                                                                                                                                                                                                                                                     |
| Briefly describe transition plan                                                                                                                                                                                                                                                                                                                             | A broadband interim panel antenna will be installed to allow the current DTV antenna to be removed and replaced with one for the new channel. A new interim facility will maintain coverage while the main antenna is replaced and transmitter retuned. |

## 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                                               | Rohde & Schwarz |
|                                            | Model                                                      | NV-8610V        |
|                                            |                                                            |                 |

|                            |               |
|----------------------------|---------------|
| Year                       | 2011          |
| Type                       | Solid State   |
| Solid State Cooling        | Liquid Cooled |
| Solid State Power capacity | 7.55 kW       |

## Primary Transmitter

### Retuning Transmitter Costs

| Section         | Question                                       | Response |
|-----------------|------------------------------------------------|----------|
| New IOT Tubes   | Number of Tubes (including accessories) needed | N/A      |
| New Mask Filter | Power                                          | 10 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              | Yes                                             |
|                    | Description                           | Transformer<br>- 75 KVA<br>K13 480<br>/400Y-230 |

|                                                                            |                                                                                               |     |
|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-----|
| <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.

**Interim Transmitter** **New Transmitter Costs**

| Section                | Question                   | Response      |
|------------------------|----------------------------|---------------|
| <b>New Transmitter</b> | Use                        | Interim       |
|                        | Description of Use         | N/A           |
|                        | Change Type                | Purchase      |
|                        | Manufacturer               |               |
|                        | Model                      | THU9-8        |
|                        | Transmitter Type           | Solid State   |
|                        | Solid State Cooling        | Liquid Cooled |
|                        | Solid State Power capacity | 11.9 kW       |
|                        |                            |               |

|  |                                   |                                                                                                  |
|--|-----------------------------------|--------------------------------------------------------------------------------------------------|
|  | Justification for New Transmitter | New Transmitter required to maintain coverage while work is done on main antenna and transmitter |
|--|-----------------------------------|--------------------------------------------------------------------------------------------------|

**Interim Transmitter**

**Other Transmitter Costs**

| Section                                                                    | Question                                                                                      | Response |
|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------|
| <b>Electrical Service</b>                                                  | Service Entrance (3 phases 800A 208V)                                                         | No       |
|                                                                            | Switchgear (industrial 800 amp)                                                               | No       |
|                                                                            | Transformer (480V)                                                                            | No       |
|                                                                            | Power                                                                                         | N/A      |
|                                                                            | Rigid Conduit and Wiring                                                                      | No       |
|                                                                            | Size                                                                                          | N/A      |
|                                                                            | Length                                                                                        | N/A      |
|                                                                            | Other Electrical Service                                                                      | No       |
|                                                                            | Description                                                                                   | N/A      |
| <b>HVAC Service</b>                                                        | Does the replacement transmitter require HVAC Service?                                        | No       |
|                                                                            | Type                                                                                          | N/A      |
|                                                                            | Size                                                                                          | N/A      |
|                                                                            | Other Size                                                                                    | N/A      |
| <b>Transmitter Building Addition/Modification or Leasehold Improvement</b> | Does the Transmitter Building require an addition, modification, other leasehold improvement? | No       |
|                                                                            | Size                                                                                          | N/A      |
| <b>Channel 14 Costs</b>                                                    | Is an RF Consulting Engineer needed?                                                          | N/A      |
|                                                                            |                                                                                               |          |

|                         |                                                                                   |     |
|-------------------------|-----------------------------------------------------------------------------------|-----|
|                         | Is a channel 14 Mask Filer needed?                                                | N/A |
|                         | Is additional field engineering time needed?                                      | N/A |
|                         | Number of Days                                                                    | N/A |
| <b>Inside RF System</b> | Is an additional interior RF system required to support this interim transmitter? | Yes |

**Interim  
Transmitter**

**Other Transmitter Cost Not Listed**

| Name                       |  | Description                                                          |
|----------------------------|--|----------------------------------------------------------------------|
| <b>System Installation</b> |  | Interim Transmitter Installation including cooling & electrical work |

**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<br/>Description</b>           | Type of change                                                   | Purchase<br>New    |
|                                                   | Antenna Use                                                      | Primary<br>(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?  | Yes                |
| <b>Existing Antenna<br/>Manufacturer and Type</b> | Class                                                            | Full Power         |
|                                                   | Mounting                                                         | Top Mount          |
|                                                   | Antenna position in stack                                        | Not in Stack       |
|                                                   | Polarization                                                     | Elliptical         |
|                                                   | Type                                                             | Slotted<br>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)<br>.....                         | 366.0 kW           |
|                                                   |                                                                  |                    |

|              |                      |
|--------------|----------------------|
| Manufacturer |                      |
| Model        | ATW25H5-<br>HTCX-40S |
| Year         | 1985                 |

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?                            | Yes             |
|                                    | Ownership                                                            | Owned           |
|                                    | Owner                                                                | N/A             |
|                                    | Is antenna shared?                                                   | No              |
|                                    | Is antenna directional?                                              | Yes             |
|                                    | Will antenna be located on or in close proximity to an antenna farm? | Yes             |
| New Antenna Manufacturer and Types | 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)<br>.....                             | 235.0 kW        |
|                                    | Manufacturer                                                         |                 |
|                                    |                                                                      |                 |

|                               |                                                                                              |
|-------------------------------|----------------------------------------------------------------------------------------------|
| Model                         | TFU-14ETT<br>/VP-R<br>4C230                                                                  |
| Year                          | 2018                                                                                         |
| Justification for New Antenna | New antenna is required because the current antenna is designed for our current channel (40) |

## 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<br>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**

| Name                  |  | Description                                                                     |
|-----------------------|--|---------------------------------------------------------------------------------|
| Antenna Input Adapter |  | Input Adapter                                                                   |
| Paint Blue            |  | Due to local restrictions, all equipment must be painted a specific blue color. |

**Interim  
Antenna**

**New Antenna Costs**

| Section                                      | Question                                                             | Response             |
|----------------------------------------------|----------------------------------------------------------------------|----------------------|
| <b>New Antenna Description</b>               | Use                                                                  | Interim              |
|                                              | Description of Use                                                   | N/A                  |
|                                              | Change Type                                                          | Purchase<br>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? | Yes                  |
| <b>New Antenna<br/>Manufacturer and Type</b> | Class                                                                | Full Power           |
|                                              | Mounting                                                             | Side Mount           |
|                                              | Antenna position in stack                                            | Not in Stack         |
|                                              | Polarization                                                         | Horizontal           |
|                                              | Type                                                                 | Broadband<br>Panel   |
|                                              | Number of Stations Supported                                         | 2                    |
|                                              | Number of Panels/Bays                                                | 5                    |
|                                              | Lower Limit                                                          | 470.00 MHz           |
|                                              | Upper Limit                                                          | 698.00 MHz           |
|                                              | Design power capacity in use                                         | 50.0 %               |
|                                              | Other Antenna Type                                                   | N/A                  |
|                                              | ERP: (Effective Radiated Power)<br>.....                             | 300.0 kW             |
|                                              | Manufacturer                                                         |                      |
|                                              | Model                                                                | TUA-C2-5<br>/10H-1-S |
|                                              | Year                                                                 | 2018                 |

|  |                               |                                                                                  |
|--|-------------------------------|----------------------------------------------------------------------------------|
|  | Justification for New Antenna | New interim antenna required to maintain coverage while main antenna is replaced |
|--|-------------------------------|----------------------------------------------------------------------------------|

**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?                                 | Yes           |
| <b>Pattern Scatter Analysis</b> | Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna? | Yes           |
| <b>Sweep Test</b>               | Do you require the sweep testing of transmission line and antenna?                                          | Yes           |

**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? | 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                                                               | Andrew           |
|                                                  | Type                                                                       | Rigid            |
|                                                  | Diameter                                                                   | 6 1/8 inches     |
|                                                  | Other Diameter                                                             | N/A              |
|                                                  | Segment Length                                                             | 19 1/2 inches    |
|                                                  | Other Segment Length                                                       | N/A              |
|                                                  | Number of parallel runs                                                    | 1                |
|                                                  | Length                                                                     | 260 feet per run |

Primary

Other Transmission Line Expenses Not Listed

Transmission Line

Information not provided.

Interim

New Transmission Line

Transmission Line

| Section                     | Question                                | Response                                      |
|-----------------------------|-----------------------------------------|-----------------------------------------------|
| New Transmission Line Costs | Use                                     | Interim                                       |
|                             | Description of Use                      | N/A                                           |
|                             | Change Type                             | Purchase New                                  |
|                             | Type                                    | Flexible Air                                  |
|                             | Diameter                                | 3 inches                                      |
|                             | Segment Length                          | N/A                                           |
|                             | Other Segment Length                    |                                               |
|                             | Number of parallel runs                 | 1                                             |
|                             | Length                                  | 475 feet per run                              |
|                             | Justification for New Transmission Line | New line required to feed new interim antenna |

Interim

Other Transmission Line Expenses Not Listed

Transmission Line

| Name       | Description                                                                     |
|------------|---------------------------------------------------------------------------------|
| Paint Blue | Due to local restrictions, all equipment must be painted a specific blue color. |

**Tower Equipment And Rigging Costs**

| Section                                  | Question                                              | Response |
|------------------------------------------|-------------------------------------------------------|----------|
| Tower Equipment or Rigging Costs Changes | Do you have tower equipment or rigging costs changes? | Yes      |

**Auxiliary Tower**

**Add Tower**

| Section                                             | Question                                                | Response                                    |
|-----------------------------------------------------|---------------------------------------------------------|---------------------------------------------|
| Existing Tower Description                          | Type of change                                          | Modify Existing                             |
|                                                     | Tower Use                                               | Auxiliary (Backup)                          |
|                                                     | Description of Use                                      | Used during transition to maintain coverage |
|                                                     | Ownership                                               | Leased                                      |
|                                                     | Is this tower consider Complex?                         | Terrain Constrained                         |
|                                                     | Is this tower currently shared with any other stations? | Yes                                         |
|                                                     | One or more FM, AM or TV radio broadcaster(s)           | Yes                                         |
|                                                     | Others Types of Users                                   | No                                          |
|                                                     | Is tower documented for structural analysis?            | No                                          |
|                                                     | Is tower compliant with Rev G?                          | No                                          |
| Existing Tower Structure Registration               | Do you have a tower registration number?                | Yes                                         |
|                                                     | ASR Number                                              | 1218276                                     |
| Coordinates (NAD83 ( North American Datum of 1983)) | Latitude (NAD83)                                        | 32° 14' 57.0" N-                            |
|                                                     | Longitude (NAD83)                                       | 111° 07' 00.9" W-                           |
|                                                     | Overall Structure Height                                | 210.96 feet                                 |
|                                                     | Support Structure Height                                | 152.89 feet                                 |

|                                              |                                                                         |
|----------------------------------------------|-------------------------------------------------------------------------|
| Ground Elevation Above Mean Sea Level (AMSL) | 4351.98 feet                                                            |
| Structure Type                               | GTOWER -<br>Guyed<br>Structure Used<br>for<br>Communication<br>Purposes |
| Tower Owner                                  | American<br>Towers, LLC.                                                |
| Date Constructed                             | 01/26/1998                                                              |

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

| Facility ID | Call Sign | Service |
|-------------|-----------|---------|
| 56053       | KHYT      | FM      |
| 36022       | KZLZ      | FM      |

## Auxiliary Tower

### Tower Modification Costs

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

## Auxiliary Tower

### Tower Rigging Costs

| Section | Question | Response |
|---------|----------|----------|
|---------|----------|----------|

|                                     |                                   |                     |
|-------------------------------------|-----------------------------------|---------------------|
| <b>Tower Rigging Costs</b>          | Complex Tower                     | Terrain constrained |
| <b>Helicopter Services Required</b> | Are helicopter services required? | No                  |

**Auxiliary  
Tower**

**Other Tower Expenses Not Listed**

| <b>Name</b>                                                         | <b>Description</b>                                               |
|---------------------------------------------------------------------|------------------------------------------------------------------|
| <b>Structural engineering tower load study for documented tower</b> | Conduct structural analysis for tower reinforcements             |
| <b>Tower Permit Drawing Package</b>                                 | Ground & Building A&E Permit Drawing Package (Cost per customer) |

## 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?                         | Terrain Constrained                                      |
|                                                    | Is this tower currently shared with any other stations? | Yes                                                      |
|                                                    | One or more FM, AM or TV radio broadcaster(s)           | Yes                                                      |
|                                                    | Others Types of Users                                   | No                                                       |
|                                                    | Is tower documented for structural analysis?            | No                                                       |
|                                                    | Is tower compliant with Rev G?                          | No                                                       |
| Existing Tower Structure Registration              | Do you have a tower registration number?                | No                                                       |
|                                                    | ASR Number                                              |                                                          |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83)                                        | 32° 14' 55.8" N-                                         |
|                                                    | Longitude (NAD83)                                       | 111° 06' 59.1" W-                                        |
|                                                    | Overall Structure Height                                | 196.90 feet                                              |
|                                                    | Support Structure Height                                | 159.10 feet                                              |
|                                                    | Ground Elevation Above Mean Sea Level (AMSL)            | 4375.00 feet                                             |
|                                                    | Structure Type                                          | GTOWER - Guyed Structure Used for Communication Purposes |
|                                                    | Tower Owner                                             | American Tower, LLC                                      |

|  |                  |            |
|--|------------------|------------|
|  | Date Constructed | 01/26/1998 |
|--|------------------|------------|

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

| Facility ID | Call Sign | Service |
|-------------|-----------|---------|
| 36022       | KZLZ      | FM      |

**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                     | Terrain constrained |
| Helicopter Services Required | Are helicopter services required? | Yes                 |

**Primary  
Tower**

**Other Tower Expenses Not Listed**

| Name                                                         | Description                                          |
|--------------------------------------------------------------|------------------------------------------------------|
| Structural engineering tower load study for documented tower | Conduct structural analysis for tower reinforcements |

|                                      |                                                                  |
|--------------------------------------|------------------------------------------------------------------|
| <b>Tower Permit Drawling Package</b> | Ground & Building A&E Permit Drawing Package (Cost per customer) |
|--------------------------------------|------------------------------------------------------------------|

**Outside  
Professional**

| Section                                                           | Question                                                                     | Response                                                                                                                                                                                                              |
|-------------------------------------------------------------------|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Services Costs<br/>Outside Project<br/>Management Services</b> | Do you require outside project management services?                          | Yes                                                                                                                                                                                                                   |
|                                                                   | Number of Hours                                                              | 1040                                                                                                                                                                                                                  |
|                                                                   | Explanation                                                                  | Project oversight of transmitter install, electrical connectivity, tower work, and antenna installation. Additional time will be spent tracking financial and legal process and coordinating with other broadcasters. |
| <b>Outside RF consulting<br/>Engineering Services</b>             | Perform engineering study for new channel assignment and antenna development | No                                                                                                                                                                                                                    |
|                                                                   | Prepare engineering section of Form FCC Construction Permit Application      | No                                                                                                                                                                                                                    |
|                                                                   | For Auxiliary Facility                                                       | N/A                                                                                                                                                                                                                   |
|                                                                   | For Main Facility                                                            | N/A                                                                                                                                                                                                                   |
|                                                                   | Prepare engineering section of Form FCC License to Cover Application         | No                                                                                                                                                                                                                    |
|                                                                   | For Auxiliary Facility                                                       | N/A                                                                                                                                                                                                                   |
|                                                                   | For Main Facility                                                            | N/A                                                                                                                                                                                                                   |
|                                                                   | 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 |
| <b>Attorney and Other<br/>Outside Consulting<br/>Services</b> | Prepare and file Form FCC Construction Permit Application                                  | Yes |
|                                                               | For Auxiliary Facility                                                                     | Yes |
|                                                               | For Main Facility                                                                          | Yes |
|                                                               | Prepare and file Form FCC License to Cover Application                                     | Yes |
|                                                               | For Auxiliary Facility                                                                     | Yes |
|                                                               | For Main Facility                                                                          | Yes |
|                                                               | Prepare request for Special Temporary Authority                                            | No  |
|                                                               | Quantity                                                                                   | N/A |
|                                                               | NEPA Section 106 environmental review                                                      | No  |
|                                                               | Environmental Assessment                                                                   | No  |
|                                                               | ASR Modification                                                                           | No  |
|                                                               | FAA Consultation (including preparation of FAA Form 7460)                                  | No  |
|                                                               | Negotiation of Lease and other Matter for Shared Locations                                 | No  |
|                                                               | Prepare or Review FCC Form 399 for Reimbursement                                           | Yes |
|                                                               | Address transition timing and coordination issues w/ other stations and wireless providers | Yes |
| <b>RF Field Engineering<br/>Services</b>                      | Comprehensive coverage verification via field study                                        | Yes |
|                                                               | RF exposure measurements                                                                   | Yes |
|                                                               | Additional Field Engineering Service                                                       | Yes |
|                                                               | Number of Days                                                                             | 30  |
|                                                               |                                                                                            |     |

|  |               |                                                        |
|--|---------------|--------------------------------------------------------|
|  | Justification | Ground Level RF design for primary and interim systems |
|--|---------------|--------------------------------------------------------|

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

If none, insert "None".

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

|                       |                                                               |
|-----------------------|---------------------------------------------------------------|
| <b>Other Expenses</b> | <b>Other Expenses Not Listed</b><br>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>Interim Transmitter THU9-8</b>                                | <b>\$754,708.49</b>         | <b>\$491,166.51</b> |                                                                                          | <b>\$0.00</b>     |                           |
| UHF - Liquid Cooled Solid State Transmitter 8.2 - 13 kW          | \$494,500.00                | \$354,354.42        | See item 1 of attached quote "KHRR Transmitter Quote Updated 9-11", plus 7.56% sales tax | \$0.00            | N/A                       |
| System Installation                                              | <b>\$112,708.49</b>         | \$112,708.49        | See 2nd item of Marsand quote. 8% sales tax added to quoted cost                         | \$0.00            | N/A                       |
| UHF inside RF system including switching                         | \$147,500.00                | \$24,103.60         | 6,962.00 switching                                                                       | N/A               | N/A                       |
| <b>Primary Transmitter NV-8610V</b>                              | <b>\$118,397.00</b>         | <b>\$57,296.89</b>  |                                                                                          | <b>\$4,887.00</b> |                           |
| Other Electrical Service: Transformer - 75 KVA K13 480 /400Y-230 | <b>\$4,887.00</b>           | \$4,887.00          | See attached invoice.                                                                    | \$4,887.00        | N/A                       |

|                                    |                |                |                                 |              |     |
|------------------------------------|----------------|----------------|---------------------------------|--------------|-----|
| UHF and VHF - minor banding issues | \$105,200.00   | \$52,409.89    | N/A                             | N/A          | N/A |
| 10 kW mask filter                  | \$8,310.00     | \$0.00         | included in transmitter install | N/A          | N/A |
| <b>Sub-total</b>                   | \$873,105.49   | \$548,463.40   | N/A                             | \$4,887.00   | N/A |
| <b>Total for all systems</b>       | \$3,033,453.70 | \$1,812,396.06 | N/A                             | \$162,361.15 | N/A |

## Components

| Actual Information                                              |                                                                                                                                                                                         |
|-----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Description                                                     | File Name                                                                                                                                                                               |
| UHF - Liquid Cooled Solid State Transmitter 8.2 - 13 kW         | <p><b>Component Description:</b> See first item of invoice plus a portion of the tax on line 3. See attached explanation of variance for line 2.</p> <p><b>Amount:</b> \$354,354.42</p> |
| System Installation                                             | <p><b>Component Description:</b> See 2nd item of invoice</p> <p><b>Amount:</b> \$52,179.86</p>                                                                                          |
| UHF inside RF system including switching                        | Information not provided.                                                                                                                                                               |
| Other Electrical Service: Transformer - 75 KVA K13 480/400Y-230 | <p><b>Component Description:</b> Transformer</p> <p><b>Amount:</b> \$4,887.00</p>                                                                                                       |
| UHF and VHF - minor banding issues                              | Information not provided.                                                                                                                                                               |
| 10 kW mask filter                                               | 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<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification      | Actual Cost | Actual Cost<br>Justification |
|------------------------------------------------------------------------------------------------------------|--------------------------------|-------------------|-----------------------------------------|-------------|------------------------------|
| Interim<br>Antenna<br>TUA-C2-5<br>/10H-1-S                                                                 | \$142,592.50                   | \$123,807.50      |                                         | \$88,094.26 |                              |
| Side mount<br>brackets<br>for high<br>power<br>antennas<br>(if not<br>included in<br>antenna<br>base cost) | \$23,150.00                    | \$16,425.00       | N/A                                     | \$0.00      | N/A                          |
| Elbow<br>complex,<br>single<br>channel, at<br>antenna<br>input, per 4<br>1/16.<br>feedline (if<br>needed)  | \$9,570.00                     | \$0.00            | N/A                                     | \$0.00      | N/A                          |
| Sweep test<br>of existing<br>antenna                                                                       | \$6,730.00                     | \$4,500.00        | See 3rd<br>item of<br>Marsand<br>quote. | \$0.00      | N/A                          |

|                                                                                                                                      |                     |                     |                                                                                                                                                                              |                    |     |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-----|
| UHF –<br>Broadband<br>Panel,<br>Side Mount<br>Auxiliary<br>/Interim,<br>300<br>horizontally<br>polarized                             | <b>\$97,882.50</b>  | \$97,882.50         | Required<br>to maintain<br>service to<br>current<br>audience<br>during<br>transition<br>between<br>removal of<br>existing<br>main and<br>completion<br>of channel<br>change. | \$88,094.26        | N/A |
| Pattern<br>scatter<br>analysis for<br>side mount<br>high/med<br>power<br>antennas<br>(if not<br>included in<br>antenna<br>base cost) | \$5,260.00          | \$5,000.00          | N/A                                                                                                                                                                          | N/A                | N/A |
| <b>Primary<br/>Antenna<br/>TFU-14ETT<br/>/VP-R<br/>4C230</b>                                                                         | <b>\$334,871.25</b> | <b>\$217,916.25</b> |                                                                                                                                                                              | <b>\$21,240.00</b> |     |
| Elbow<br>complex,<br>single<br>channel, at<br>antenna<br>input, per 6<br>1/8.<br>feedline (if<br>needed)                             | \$12,300.00         | \$10,297.50         | N/A                                                                                                                                                                          | \$0.00             | N/A |
| Sweep test<br>of existing<br>antenna                                                                                                 | \$6,730.00          | \$4,500.00          | N/A                                                                                                                                                                          | \$0.00             | N/A |

|                                                                                                      |                    |                |                                                                                |              |     |
|------------------------------------------------------------------------------------------------------|--------------------|----------------|--------------------------------------------------------------------------------|--------------|-----|
| Antenna Input Adapter                                                                                | <b>\$2,741.25</b>  | \$2,741.25     | Estimate includes lines 4 and 5 of attached proposal.                          | \$0.00       | N/A |
| Paint Blue                                                                                           | <b>\$23,600.00</b> | \$23,600.00    | See attachment "KHRR Primary Antenna Paint Blue Cost"                          | \$21,240.00  | N/A |
| UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized | \$289,500.00       | \$176,777.50   | Cost above reflects Antenna cost and line sweep from attached antenna proposal | \$0.00       | N/A |
| <b>Sub-total</b>                                                                                     | \$477,463.75       | \$341,723.75   | N/A                                                                            | \$109,334.26 | N/A |
| <b>Total for all systems</b>                                                                         | \$3,033,453.70     | \$1,812,396.06 | N/A                                                                            | \$162,361.15 | N/A |

## Components

| Actual Information                                                                 |                                                                                                                                                                                              |
|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Description                                                                        | File Name                                                                                                                                                                                    |
| Side mount brackets for high power antennas (if not included in antenna base cost) | <p><b>Component Description:</b> See line 2 of invoice.</p> <p><b>Amount:</b> \$7,391.25</p><br><p><b>Component Description:</b> See line 2 of invoice.</p> <p><b>Amount:</b> \$7,391.25</p> |

|                                                                                                        |                                                 |                                       |
|--------------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------------|
| Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)                      | Information not provided.                       |                                       |
| Sweep test of existing antenna                                                                         | <b>Component Description:</b><br><b>Amount:</b> | See 3rd item of invoice<br>\$2,250.00 |
| UHF – Broadband Panel, Side Mount Auxiliary/Interim, 300 horizontally polarized                        | <b>Component Description:</b><br><b>Amount:</b> | See line 1 of invoice.<br>\$44,047.13 |
|                                                                                                        | <b>Component Description:</b><br><b>Amount:</b> | See line 1 of invoice.<br>\$44,047.13 |
| Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost) | Information not provided.                       |                                       |
| Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)                       | <b>Component Description:</b><br><b>Amount:</b> | See line 3 of invoice.<br>\$4,633.88  |
|                                                                                                        | <b>Component Description:</b><br><b>Amount:</b> | See line 3 of invoice.<br>\$4,633.88  |
|                                                                                                        | <b>Component Description:</b><br><b>Amount:</b> | 10% remaining of line 3<br>\$1,029.74 |

|                                                                                                      |                                                                |                                                          |
|------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------|
| Sweep test of existing antenna                                                                       | <div><div>Component Description:</div><div>Amount:</div></div> | <div>See 4th item of invoice</div> <div>\$2,250.00</div> |
| Antenna Input Adapter                                                                                | <div>Component Description:</div>                              | See lines 4 and 5 of invoice.                            |
|                                                                                                      | <div>Amount:</div>                                             | \$1,233.56                                               |
|                                                                                                      | <div>Component Description:</div>                              | See lines 4 and 5 of invoice.                            |
|                                                                                                      | <div>Amount:</div>                                             | \$1,233.56                                               |
| Paint Blue                                                                                           | <div>Component Description:</div>                              | Second 45% of order.                                     |
|                                                                                                      | <div>Amount:</div>                                             | \$10,620.00                                              |
|                                                                                                      | <div>Component Description:</div>                              | 45% of order.                                            |
|                                                                                                      | <div>Amount:</div>                                             | \$10,620.00                                              |
| UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized | <div>Component Description:</div>                              | See line 1 of invoice.                                   |
|                                                                                                      | <div>Amount:</div>                                             | \$69,987.38                                              |
|                                                                                                      | <div>Component Description:</div>                              | 10% remaining balance on line 1                          |
|                                                                                                      | <div>Amount:</div>                                             | \$15,552.74                                              |
|                                                                                                      | <div>Component Description:</div>                              | See line 1 of invoice.                                   |
|                                                                                                      | <div>Amount:</div>                                             | \$69,987.38                                              |

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                       | \$29,225.00                 | \$31,493.65    |                                                                                                          | \$28,344.28  |                           |
| Flexible Air Transmission Line - dielectric, 3" | \$28,025.00                 | \$30,293.65    | See attached quote named "KHRR Interim Antenna Additional Proposal". Includes all items except painting. | \$27,264.28  | N/A                       |
| Paint Blue                                      | <i>\$1,200.00</i>           | \$1,200.00     | See lines 23 and 24 on attachment "KHRR Interim Antenna Additional Items".                               | \$1,080.00   | N/A                       |
| Primary Transmission Line                       | \$0.00                      | \$0.00         |                                                                                                          | \$0.00       |                           |
| Sub-total                                       | \$29,225.00                 | \$31,493.65    | N/A                                                                                                      | \$28,344.28  | N/A                       |
| Total for all systems                           | \$3,033,453.70              | \$1,812,396.06 | N/A                                                                                                      | \$162,361.15 | N/A                       |

Components

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

|                                                    |                                                                                                                                                                                                                                                                     |
|----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Flexible Air Transmission<br>Line - dielectric, 3" | <div> <div> <b>Component Description:</b> All lines except<br/> 24 and 25. </div> <div> <b>Amount:</b> \$13,632.14 </div> </div> <div> <div> <b>Component Description:</b> All lines except<br/> 24 and 25. </div> <div> <b>Amount:</b> \$13,632.14 </div> </div>   |
| Paint Blue                                         | <div> <div> <b>Component Description:</b> See lines 24 and<br/> 25 of invoice. </div> <div> <b>Amount:</b> \$540.00 </div> </div> <div> <div> <b>Component Description:</b> See lines 24 and<br/> 25 of invoice. </div> <div> <b>Amount:</b> \$540.00 </div> </div> |

## 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>Auxiliary Tower GTOWER</b>                                                                                              | <b>\$615,238.00</b>         | <b>\$215,403.80</b> |                                                             | <b>\$0.00</b> |                           |
| Structural engineering tower load study for documented tower                                                               | <i>\$5,238.00</i>           | \$5,238.00          | N/A                                                         | \$0.00        | N/A                       |
| Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study | \$26,300.00                 | \$8,173.00          | See line 5 of attached quote.                               | \$0.00        | N/A                       |
| Minor tower reinforcement /modifications                                                                                   | \$158,000.00                | \$20,000.00         | N/A                                                         | \$0.00        | N/A                       |
| Tower Permit Drawing Package                                                                                               | <i>\$4,700.00</i>           | \$4,700.00          | N/A                                                         | N/A           | N/A                       |
| Complex Tower (includes, for example, those with candelabras and/or stacked antennas)                                      | \$421,000.00                | \$177,292.80        | Interim Antenna Install, old line removal, new line install | \$0.00        | N/A                       |

|                                                                                                                                                             |                       |                       |                                                           |                     |            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------|-----------------------------------------------------------|---------------------|------------|
| <b>Primary Tower<br/>GTOWER</b>                                                                                                                             | <b>\$615,238.00</b>   | <b>\$307,308.00</b>   |                                                           | <b>\$0.00</b>       |            |
| Tower Permit<br>Drawing<br>Package                                                                                                                          | <b>\$4,700.00</b>     | \$4,700.00            | N/A                                                       | N/A                 | N/A        |
| Structural<br>engineering<br>tower load<br>study for<br>documented<br>tower                                                                                 | <b>\$5,238.00</b>     | \$5,238.00            | N/A                                                       | \$0.00              | N/A        |
| Tower<br>Helicopter Lift                                                                                                                                    | <b>\$0.00</b>         | \$0.00                | included in<br>above<br>install cost                      | N/A                 | N/A        |
| Minor tower<br>reinforcement<br>/modifications                                                                                                              | \$158,000.00          | \$26,500.00           | See line 5<br>of attached<br>proposal                     | \$0.00              | N/A        |
| Tower<br>mapping for<br>an<br>undocumented<br>/poorly<br>documented<br>tower and<br>preparation of<br>documentation<br>necessary for<br>tower load<br>study | \$26,300.00           | \$10,300.00           | N/A                                                       | \$0.00              | N/A        |
| Complex<br>Tower<br>(includes, for<br>example,<br>those with<br>candelabras<br>and/or<br>stacked<br>antennas)                                               | \$421,000.00          | \$260,570.00          | New Main<br>antenna<br>install<br>including<br>helicopter | \$0.00              | N/A        |
| <b>Sub-total</b>                                                                                                                                            | <b>\$1,230,476.00</b> | <b>\$522,711.80</b>   | <b>N/A</b>                                                | <b>\$0.00</b>       | <b>N/A</b> |
| <b>Total for all<br/>systems</b>                                                                                                                            | <b>\$3,033,453.70</b> | <b>\$1,812,396.06</b> | <b>N/A</b>                                                | <b>\$162,361.15</b> | <b>N/A</b> |

## Components

| Actual Information                                                                                                        |                                                                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Description                                                                                                               | File Name                                                                                                                                  |
| Structural engineering tower load study for documented tower                                                              | <b>Component Description:</b> Broadcast Structural<br><b>Amount:</b> \$5,238.00                                                            |
| Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study | <b>Component Description:</b> Broadcast Tower Mapping<br><b>Amount:</b> \$8,173.00                                                         |
| Minor tower reinforcement /modifications                                                                                  | <b>Component Description:</b> Capital contribution to tower modifications<br><b>Amount:</b> \$1,250.00                                     |
| Tower Permit Drawing Package                                                                                              | Information not provided.                                                                                                                  |
| Complex Tower (includes, for example, those with candelabras and/or stacked antennas)                                     | <b>Component Description:</b> See 5th item of invoice, plus 2 lines at bottom labeled "Tower crew to cut..."<br><b>Amount:</b> \$84,686.40 |
| Tower Permit Drawling Package                                                                                             | Information not provided.                                                                                                                  |
| Structural engineering tower load study for documented tower                                                              | <b>Component Description:</b> Broadcast Structural<br><b>Amount:</b> \$5,238.00                                                            |
| Tower Helicopter Lift                                                                                                     | Information not provided.                                                                                                                  |

|                                                                                                                           |                                                                                                                                                             |
|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Minor tower reinforcement /modifications                                                                                  | <div> <div>Component Description:</div> <div>Capital contribution to tower modifications</div> </div> <div> <div>Amount:</div> <div>\$1,250.00</div> </div> |
| Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study | <div> <div>Component Description:</div> <div>Broadcast Tower Mapping</div> </div> <div> <div>Amount:</div> <div>\$10,300.00</div> </div>                    |
| Complex Tower (includes, for example, those with candelabras and/or stacked antennas)                                     | <div> <div>Component Description:</div> <div>See 6th item of invoice</div> </div> <div> <div>Amount:</div> <div>\$130,285.00</div> </div>                   |

## 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>\$316,665.00</b>         | <b>\$262,050.00</b> |                              | <b>\$19,795.61</b> |                           |
| Prepare and or review reimbursement form                                               | \$2,630.00                  | \$2,500.00          | N/A                          | \$499.86           | N/A                       |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00                  | \$5,000.00          | N/A                          | \$226.80           | N/A                       |
| Additional Field Engineering Service, 30 Days                                          | <i>\$30,000.00</i>          | \$30,000.00         | N/A                          | \$0.00             | N/A                       |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application    | \$2,365.00                  | \$2,050.00          | N/A                          | \$0.00             | N/A                       |
| Project management of the transition                                                   | \$164,320.00                | \$156,000.00        | N/A                          | \$19,068.95        | N/A                       |
| RF Exposure Measurements                                                               | \$21,050.00                 | \$20,000.00         | N/A                          | N/A                | N/A                       |
| Comprehensive coverage verification via field study, if needed                         | \$84,200.00                 | \$40,000.00         | N/A                          | N/A                | N/A                       |

|                                                                                                                         |                |                |     |              |     |
|-------------------------------------------------------------------------------------------------------------------------|----------------|----------------|-----|--------------|-----|
| Attorney Fees -<br>Aux Antenna,<br>prepare and<br>File Form 2100<br>Construction<br>Permit or<br>License<br>Application | \$4,210.00     | \$4,000.00     | N/A | N/A          | N/A |
| Address<br>transition<br>timing and<br>coordination<br>issues w/ other<br>stations and<br>wireless                      | \$2,630.00     | \$2,500.00     | N/A | N/A          | N/A |
| <b>Sub-total</b>                                                                                                        | \$316,665.00   | \$262,050.00   | N/A | \$19,795.61  | N/A |
| <b>Total for all<br/>systems</b>                                                                                        | \$3,033,453.70 | \$1,812,396.06 | N/A | \$162,361.15 | N/A |

## Components

| Actual Information                          |                                                                                   |
|---------------------------------------------|-----------------------------------------------------------------------------------|
| Description                                 | File Name                                                                         |
| Prepare and or review<br>reimbursement form |                                                                                   |
|                                             | <b>Component Description:</b> Lines 3-5 of<br>invoice, less 10%<br>discount.      |
|                                             | <b>Amount:</b> \$499.86                                                           |
|                                             |                                                                                   |
|                                             | <b>Component Description:</b> See half of line 1,<br>less 10% vendor<br>discount. |
|                                             | <b>Amount:</b> \$94.50                                                            |

|                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                               |                                                                                                                                            |                |             |                               |                                                          |                |          |
|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------|-------------------------------|----------------------------------------------------------|----------------|----------|
| <p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p> | <table> <tr> <td data-bbox="703 174 1011 210"><b>Component Description:</b></td><td data-bbox="1147 174 1353 286">See lines 1-2 of invoice, less 10% vendor discount.</td></tr> <tr> <td data-bbox="703 297 815 327"><b>Amount:</b></td><td data-bbox="1147 297 1244 327">\$226.80</td></tr> <tr> <td data-bbox="703 434 1011 470"><b>Component Description:</b></td><td data-bbox="1147 434 1366 546">See line 2 and half of line 1, less 10% vendor discount.</td></tr> <tr> <td data-bbox="703 557 815 586"><b>Amount:</b></td><td data-bbox="1147 557 1244 586">\$170.10</td></tr> </table> | <b>Component Description:</b> | See lines 1-2 of invoice, less 10% vendor discount.                                                                                        | <b>Amount:</b> | \$226.80    | <b>Component Description:</b> | See line 2 and half of line 1, less 10% vendor discount. | <b>Amount:</b> | \$170.10 |
| <b>Component Description:</b>                                                                 | See lines 1-2 of invoice, less 10% vendor discount.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                               |                                                                                                                                            |                |             |                               |                                                          |                |          |
| <b>Amount:</b>                                                                                | \$226.80                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |                                                                                                                                            |                |             |                               |                                                          |                |          |
| <b>Component Description:</b>                                                                 | See line 2 and half of line 1, less 10% vendor discount.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |                                                                                                                                            |                |             |                               |                                                          |                |          |
| <b>Amount:</b>                                                                                | \$170.10                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |                                                                                                                                            |                |             |                               |                                                          |                |          |
| <p>Additional Field Engineering Service, 30 Days</p>                                          | <table> <tr> <td data-bbox="703 725 1011 761"><b>Component Description:</b></td><td data-bbox="1147 725 1372 1077">Engineering site visit, inspection, measurements, drawing and planning for repack transmitter and RF installation, budgeting and planning.</td></tr> <tr> <td data-bbox="703 1088 815 1117"><b>Amount:</b></td><td data-bbox="1147 1088 1279 1117">\$10,000.00</td></tr> </table>                                                                                                                                                                                            | <b>Component Description:</b> | Engineering site visit, inspection, measurements, drawing and planning for repack transmitter and RF installation, budgeting and planning. | <b>Amount:</b> | \$10,000.00 |                               |                                                          |                |          |
| <b>Component Description:</b>                                                                 | Engineering site visit, inspection, measurements, drawing and planning for repack transmitter and RF installation, budgeting and planning.                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                               |                                                                                                                                            |                |             |                               |                                                          |                |          |
| <b>Amount:</b>                                                                                | \$10,000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                               |                                                                                                                                            |                |             |                               |                                                          |                |          |
| <p>Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application</p>     | <p>Information not provided.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                               |                                                                                                                                            |                |             |                               |                                                          |                |          |

|                                      |                                                     |                                                                                                 |
|--------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------------------------------------|
| Project management of the transition | <b>Component Description:</b><br><br><b>Amount:</b> | Project Management Services<br>\$2,145.00                                                       |
|                                      | <b>Component Description:</b><br><br><b>Amount:</b> | Project Management Services<br>\$2,145.00                                                       |
|                                      | <b>Component Description:</b><br><br><b>Amount:</b> | Project Management Services<br>\$3,510.00                                                       |
|                                      | <b>Component Description:</b><br><br><b>Amount:</b> | Project Management Services<br>\$6,630.00                                                       |
|                                      | <b>Component Description:</b><br><br><b>Amount:</b> | Project Management Services<br>\$4,290.00                                                       |
|                                      | <b>Component Description:</b><br><br><b>Amount:</b> | Project Management Services<br>\$348.95                                                         |
|                                      | <b>Component Description:</b><br><br><b>Amount:</b> | See "Project Management" on invoice, itemized with work that has been completed.<br>\$21,246.00 |
| RF Exposure Measurements             | Information not provided.                           |                                                                                                 |

|                                                                                                    |                           |
|----------------------------------------------------------------------------------------------------|---------------------------|
| Comprehensive coverage verification via field study, if needed                                     | Information not provided. |
| Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application | Information not provided. |
| Address transition timing and coordination issues w/ other stations and wireless                   | Information not provided. |

## 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>\$106,518.46</b>         | <b>\$105,953.46</b> |                              | <b>\$0.00</b> |                           |
| MVPD Notification of Channel Change                                      | <i>\$12,000.00</i>          | \$12,000.00         | N/A                          | N/A           | N/A                       |
| Develop and air announcement of upcoming channel change                  | <i>\$20,000.00</i>          | \$20,000.00         | N/A                          | N/A           | N/A                       |
| Equipment Storage                                                        | <i>\$5,000.00</i>           | \$5,000.00          | N/A                          | N/A           | N/A                       |
| Equipment Delivery and Handling Charges                                  | <i>\$10,000.00</i>          | \$10,000.00         | N/A                          | N/A           | N/A                       |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$38,038.46</i>          | \$38,038.46         | removal of old transmitter   | \$0.00        | N/A                       |
| Non-zoning permits                                                       | <i>\$4,700.00</i>           | \$4,700.00          | N/A                          | N/A           | N/A                       |
| Local Zoning                                                             | <i>\$4,700.00</i>           | \$4,700.00          | 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 |
| DTV Medical Facility Notification                        | \$11,550.00    | \$11,000.00    | N/A | N/A          | N/A |
| <b>Sub-total</b>                                         | \$106,518.46   | \$105,953.46   | N/A | \$0.00       | N/A |
| <b>Total for all systems</b>                             | \$3,033,453.70 | \$1,812,396.06 | N/A | \$162,361.15 | N/A |

## Components

| Actual Information                                                       |                                                                                     |
|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| Description                                                              | File Name                                                                           |
| MVPD Notification of Channel Change                                      | Information not provided.                                                           |
| Develop and air announcement of upcoming channel change                  | Information not provided.                                                           |
| Equipment Storage                                                        | Information not provided.                                                           |
| Equipment Delivery and Handling Charges                                  | Information not provided.                                                           |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <b>Component Description:</b> See 1st line of invoice<br><b>Amount:</b> \$19,019.23 |
| Non-zoning permits                                                       | 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.                                                           |

|                                      |                           |
|--------------------------------------|---------------------------|
| DTV Medical Facility<br>Notification | Information not provided. |
|--------------------------------------|---------------------------|

|                  |                       |                             |                |              |
|------------------|-----------------------|-----------------------------|----------------|--------------|
| Cost Information | Grand Total           |                             |                |              |
|                  |                       | Predetermined Cost Estimate | Estimated Cost | Actual Cost  |
|                  | Total for all systems | \$3,033,453.70              | \$1,812,396.06 | \$162,361.15 |

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

| Certification | Section                                     | Question                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Response |
|---------------|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
|               | Submission of Estimated Expenses Statements | <p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>                                                                                                                                                       |          |
|               |                                             | <ol style="list-style-type: none"> <li>1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.</li> </ol> |          |

4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

|                                                                                                                                                                                                                                   |                                                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| <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><b>Margaret L Tobey</b><br/> <i>Assistant Secretary</i></p> <p>02/06/2018</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"> <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>Margaret L Tobey</b><br/> <i>Assistant Secretary</i></p> <p>02/06/2018</p> |

## Attachments