



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **60653** | Service: **DTV** | Call **WETM-TV** | Channel: **23 (UHF)** |  
ID: | Sign:  
File **0000028766**  
Number:  
FRN: **0009961889** | Date **08/14**  
Submitted: **/2017**

## Applicant Information

### Applicant Name, Type, and Contact Information

| Applicant                         | Address                                                                                               | Phone             | Email             | Applicant Type |
|-----------------------------------|-------------------------------------------------------------------------------------------------------|-------------------|-------------------|----------------|
| <b>Nexstar Broadcasting, Inc.</b> | Elizabeth Ryder<br>545 E. JOHN CARPENTER<br>FREEWAY<br>SUITE 700<br>IRVING, TX 75062<br>United States | +1 (972) 373-8800 | eryder@nexstar.tv | Corporation    |

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

| Applicant      | Address | Phone | Email |
|----------------|---------|-------|-------|
| [Confidential] |         |       |       |

## Preparer Contact Information

### Preparer Contact Name and Information

| Applicant                                                                             | Address                                                                                               | Phone             | Email             |
|---------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-------------------|-------------------|
| <b>Elizabeth Ryder</b><br><i>General Counsel</i><br><i>Nexstar Broadcasting, Inc.</i> | Elizabeth Ryder<br>545 E. John Carpenter<br>Freeway<br>Suite 700<br>Irving, TX 75062<br>United States | +1 (972) 373-8800 | eryder@nexstar.tv |

**Broadcaster  
Information  
and  
Transition  
Plan**

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

**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                                               | R & S           |
|                                            | Model                                                      | NV8303          |
|                                            | Year                                                       | 2010            |
|                                            | Type                                                       | Solid State     |

|  |                            |            |
|--|----------------------------|------------|
|  | Solid State Cooling        | Air Cooled |
|  | Solid State Power capacity | 1.5 kW     |

**Primary  
Transmitter**

**Retuning Transmitter Costs**

| Section         | Question                                       | Response                     |
|-----------------|------------------------------------------------|------------------------------|
| New IOT Tubes   | Number of Tubes (including accessories) needed | N/A                          |
| New Mask Filter | Power                                          | 1.5 kW                       |
|                 | Other Power                                    | N/A                          |
| New Exciter     | Is a new exciter needed?                       | Yes                          |
|                 | Exciter Type                                   | Dual exciter with changeover |

**Primary  
Transmitter**

**Other Transmitter Costs**

| Section            | Question                                               | Response |
|--------------------|--------------------------------------------------------|----------|
| Electrical Service | Service Entrance (3 phases 800A 208V)                  | No       |
|                    | Switchgear (industrial 800 amp)                        | No       |
|                    | Transformer (480V)                                     | No       |
|                    | Power                                                  | N/A      |
|                    | Rigid Conduit and Wiring                               | No       |
|                    | Size                                                   | N/A      |
|                    | Length                                                 | N/A      |
|                    | Other Electrical Service                               | No       |
|                    | Description                                            | N/A      |
| HVAC Service       | Does the replacement transmitter require HVAC Service? | No       |
|                    | Type                                                   | N/A      |
|                    |                                                        |          |

|                                                                            |                                                                                               |     |
|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-----|
|                                                                            | Size                                                                                          | N/A |
|                                                                            | Other Size                                                                                    | N/A |
| <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.

**Auxiliary  
Transmitter****Add Transmitter Information**

| Section                                               | Question                                                   | Response              |
|-------------------------------------------------------|------------------------------------------------------------|-----------------------|
| <b>Existing Transmitter<br/>Description</b>           | Type of change                                             | Purchase<br>New       |
|                                                       | Use                                                        | Auxiliary<br>(Backup) |
|                                                       | Description of Use                                         | Backup                |
|                                                       | Ownership                                                  | Owned                 |
|                                                       | Owner                                                      | N/A                   |
|                                                       | Site                                                       | N/A                   |
|                                                       | Is this transmitter currently shared with another station? | No                    |
|                                                       | Is this transmitter currently in operating condition?      | Yes                   |
| <b>Existing Transmitter<br/>Manufacturer and Type</b> | Manufacturer                                               |                       |
|                                                       | Model                                                      | 1232A                 |
|                                                       | Year                                                       | 1992                  |
|                                                       | Type                                                       | Solid State           |
|                                                       | Solid State Cooling                                        | Air Cooled            |
|                                                       | Solid State Power Capacity                                 | 1.3 kW                |

**Auxiliary  
Transmitter**

**New Transmitter Costs**

| Section         | Question                                  | Response                                                                                                                        |
|-----------------|-------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|
| New Transmitter | Use                                       | Auxiliary<br>(Backup)                                                                                                           |
|                 | Change Type                               | Purchase<br>New                                                                                                                 |
|                 | Is this a request for upgraded equipment? | No                                                                                                                              |
|                 | Manufacturer                              |                                                                                                                                 |
|                 | Model                                     | TBD                                                                                                                             |
|                 | Transmitter Type                          | Solid State                                                                                                                     |
|                 | Solid State Cooling                       | Air Cooled                                                                                                                      |
|                 | Solid State Power capacity                | 1.8 kW                                                                                                                          |
|                 | Justification for New Transmitter         | Existing<br>transmitter<br>cannot be<br>converted to<br>repacked<br>channel and<br>manufacturer<br>is no longer<br>in business. |

**Auxiliary  
Transmitter**

**Other Transmitter Costs**

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

|                                                                            |                                                                                               |     |
|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-----|
|                                                                            | Other Electrical Service                                                                      | No  |
|                                                                            | Description                                                                                   | N/A |
| <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 |

**Auxiliary  
Transmitter**

**Other Transmitter Cost Not Listed**

Information not provided.

**Antennas**

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

**Primary  
Antenna****Existing Antenna Information**

| Section                                   | Question                                                         | Response           |
|-------------------------------------------|------------------------------------------------------------------|--------------------|
| Existing Antenna<br>Description           | Type of change                                                   | Retune<br>Existing |
|                                           | 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?  | No                 |
| Existing Antenna<br>Manufacturer and Type | Class                                                            | Full Power         |
|                                           | Mounting                                                         | Side Mount         |
|                                           | Antenna position in stack                                        | Not in Stack       |
|                                           | Polarization                                                     | Horizontal         |
|                                           | Type                                                             | Broadband<br>Panel |
|                                           | Number of Stations Supported                                     | 1                  |
|                                           | Number of Panels                                                 | 40                 |
|                                           | Design power capacity in use                                     | 10.0 %             |
|                                           | Lower Limit                                                      | 470.00 MHz         |

|                                 |                |
|---------------------------------|----------------|
| Upper Limit                     | 700.00 MHz     |
| Other Antenna Type              | N/A            |
| ERP: (Effective Radiated Power) | 100.0 kW       |
| Manufacturer                    | HARRIS         |
| Model                           | TAD-20UDA 4/40 |
| Year                            | 1997           |

**Primary  
Antenna**

**Adjustment to Existing Antenna**

| Section                        | Question                                      | Response |
|--------------------------------|-----------------------------------------------|----------|
| Sweep Test of Existing Antenna | Do you need a sweep test of existing antenna? | Yes      |

**Primary  
Antenna**

**Other Antenna Costs**

| Section                     | Question                                     | Response |
|-----------------------------|----------------------------------------------|----------|
| Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | No       |
|                             | Type                                         |          |
|                             | Number of channels supported                 | N/A      |
|                             | Frequencies of channels supported            | N/A      |
|                             | Frequency                                    |          |

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Transmission Line**

| Section                               | Question                                        | Response |
|---------------------------------------|-------------------------------------------------|----------|
| Transmission Line<br>Related Expenses | Do you have transmission line related expenses? | Yes      |

**Primary**  
**Transmission Line**

**Existing Transmission Line**

| Section                                                 | Question                                                                   | Response         |
|---------------------------------------------------------|----------------------------------------------------------------------------|------------------|
| <b>Existing Transmission Line Description</b>           | Type of change                                                             | Purchase New     |
|                                                         | Use                                                                        | Primary (Main)   |
|                                                         | Description of Use                                                         | N/A              |
|                                                         | Ownership                                                                  | Owned            |
|                                                         | Owner                                                                      | N/A              |
|                                                         | Site                                                                       | N/A              |
|                                                         | Is the existing transmission line shared with another station or stations? | No               |
|                                                         | Is Transmission Line in operating condition?                               | Yes              |
| <b>Existing Transmission Line Manufacturer and Type</b> | Manufacturer                                                               |                  |
|                                                         | 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                                                                     | 880 feet per run |

**Primary**      **New Transmission Line**  
**Transmission Line**

| Section                            | Question                                  | Response                                                                          |
|------------------------------------|-------------------------------------------|-----------------------------------------------------------------------------------|
| <b>New Transmission Line Costs</b> | Use                                       | Primary (Main)                                                                    |
|                                    | Description of Use                        | N/A                                                                               |
|                                    | Change Type                               | Purchase New                                                                      |
|                                    | Is this a request for upgraded equipment? | No                                                                                |
|                                    | Type                                      | Rigid                                                                             |
|                                    | Diameter                                  | 6 1/8 inches                                                                      |
|                                    | Other Diameter                            | N/A                                                                               |
|                                    | Segment Length                            | 20 inches                                                                         |
|                                    | Other Segment Length                      | N/A                                                                               |
|                                    | Number of parallel runs                   | 1                                                                                 |
|                                    | Length                                    | 880 feet per run                                                                  |
|                                    | Justification for New Transmission Line   | Existing line has been swept and shows VSWR stackup from incorrect line sections. |

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

| Name                | Description                                                                      |
|---------------------|----------------------------------------------------------------------------------|
| <b>Interim Line</b> | 450 ft of 3" flex line to run to temporary antenna while other line is replaced. |

**Tower  
Equipment  
And  
Rigging  
Costs**

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

**Primary  
Tower**

**Existing Tower**

| Section                                             | Question                                                | Response          |
|-----------------------------------------------------|---------------------------------------------------------|-------------------|
| Existing Tower Description                          | Type of change                                          | Modify Existing   |
|                                                     | Tower Use                                               | Primary (Main)    |
|                                                     | Description of Use                                      | N/A               |
|                                                     | Ownership                                               | Owned             |
|                                                     | Is this tower consider Complex?                         | No                |
|                                                     | Is this tower currently shared with any other stations? | No                |
|                                                     | One or more FM, AM or TV radio broadcaster(s)           | N/A               |
|                                                     | Others Types of Users                                   | N/A               |
|                                                     | Is tower documented for structural analysis?            | Yes               |
|                                                     | Is tower compliant with Rev G?                          | Unknown           |
| Existing Tower Structure Registration               | Do you have a tower registration number?                | Yes               |
|                                                     | ASR Number                                              | 1010439           |
| Coordinates (NAD83 ( North American Datum of 1983)) | Latitude (NAD83)                                        | 42° 06' 22.0" N-  |
|                                                     | Longitude (NAD83)                                       | 076° 52' 16.0" W- |
|                                                     | Overall Structure Height                                | 842.84 feet       |
|                                                     | Support Structure Height                                | 798.87 feet       |
|                                                     | Ground Elevation Above Mean Sea Level (AMSL)            | 1706.02 feet      |

|  |                  |                                          |
|--|------------------|------------------------------------------|
|  | Structure Type   | TOWER - Free Standing or Guyed Structure |
|  | Tower Owner      | Nexstar Broadcasting, Inc.               |
|  | Date Constructed | 09/01/1963                               |

**Primary Tower**

**Tower Modification Costs**

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

**Primary Tower**

**Tower Rigging Costs**

| Section                      | Question                          | Response |
|------------------------------|-----------------------------------|----------|
| Tower Rigging Costs          | Complex Tower                     | N/A      |
| Helicopter Services Required | Are helicopter services required? | No       |

**Primary Tower**

**Other Tower Expenses Not Listed**

| Name                    | Description                                    |
|-------------------------|------------------------------------------------|
| Interim antenna rigging | Install interim antenna and transmission line. |

**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                                                              | 173                                                                                                                                                                                                                                   |
|                                                                   | Explanation                                                                  | It will be necessary to schedule and coordinate multiple vendors, complete progress reports, and update Schedule 399. Station does not have available personnel or personnel trained in project management for such complex projects. |
| <b>Outside RF consulting<br/>Engineering Services</b>             | Perform engineering study for new channel assignment and antenna development | Yes                                                                                                                                                                                                                                   |
|                                                                   | Prepare engineering section of Form FCC Construction Permit Application      | Yes                                                                                                                                                                                                                                   |
|                                                                   | For Auxiliary Facility                                                       | No                                                                                                                                                                                                                                    |
|                                                                   | For Main Facility                                                            | Yes                                                                                                                                                                                                                                   |
|                                                                   | Prepare engineering section of Form FCC License to Cover Application         | Yes                                                                                                                                                                                                                                   |
|                                                                   | For Auxiliary Facility                                                       | No                                                                                                                                                                                                                                    |
|                                                                   | For Main Facility                                                            | Yes                                                                                                                                                                                                                                   |
|                                                                   | Prepare request for Special Temporary Authority                              | Yes                                                                                                                                                                                                                                   |

|                                                       |                                                                                            |     |
|-------------------------------------------------------|--------------------------------------------------------------------------------------------|-----|
|                                                       | Quantity                                                                                   | 1   |
|                                                       | Do you have Distributed Transmission System engineering services?                          | N/A |
|                                                       | Critical Facility                                                                          | N/A |
|                                                       | Terrain-Shielded Facility                                                                  | N/A |
| <b>Attorney and Other Outside Consulting Services</b> | Prepare and file Form FCC Construction Permit Application                                  | Yes |
|                                                       | For Auxiliary Facility                                                                     | No  |
|                                                       | For Main Facility                                                                          | Yes |
|                                                       | Prepare and file Form FCC License to Cover Application                                     | Yes |
|                                                       | For Auxiliary Facility                                                                     | No  |
|                                                       | For Main Facility                                                                          | Yes |
|                                                       | Prepare request for Special Temporary Authority                                            | Yes |
|                                                       | Quantity                                                                                   | 1   |
|                                                       | NEPA Section 106 environmental review                                                      | No  |
|                                                       | Environmental Assessment                                                                   | No  |
|                                                       | ASR Modification                                                                           | No  |
|                                                       | FAA Consultation (including preparation of FAA Form 7460)                                  | No  |
|                                                       | Negotiation of Lease and other Matter for Shared Locations                                 | No  |
|                                                       | Prepare or Review FCC Form 399 for Reimbursement                                           | Yes |
|                                                       | Address transition timing and coordination issues w/ other stations and wireless providers | No  |
| <b>RF Field Engineering Services</b>                  | Comprehensive coverage verification via field study                                        | No  |
|                                                       | RF exposure measurements                                                                   | No  |
|                                                       | Additional Field Engineering Service                                                       | No  |

|  |                |     |
|--|----------------|-----|
|  | Number of Days | N/A |
|  | Justification  | N/A |

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

If services not provided.

## Other Expenses

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

| Other<br>Expenses | Other Expenses Not Listed |
|-------------------|---------------------------|
|                   | Information not provided. |

## Cost Information

### Transmitters

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

| Description                                         | Predetermined Cost Estimate | Estimated Cost        | Estimated Cost Justification | Actual Cost   | Actual Cost Justification |
|-----------------------------------------------------|-----------------------------|-----------------------|------------------------------|---------------|---------------------------|
| <b>Primary Transmitter NV8303</b>                   | <b>\$155,580.00</b>         | <b>\$140,100.00</b>   |                              | <b>\$0.00</b> |                           |
| Dual exciter system with change over                | \$47,350.00                 | \$37,300.00           | See attached quote.          | N/A           | N/A                       |
| UHF and VHF - minor banding issues                  | \$105,200.00                | \$100,000.00          | N/A                          | N/A           | N/A                       |
| 1.5 kW mask filter                                  | \$3,030.00                  | \$2,800.00            | N/A                          | N/A           | N/A                       |
| <b>Auxiliary Transmitter TBD</b>                    | <b>\$126,000.00</b>         | <b>\$120,000.00</b>   |                              | <b>\$0.00</b> |                           |
| UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW | \$126,000.00                | \$120,000.00          | N/A                          | N/A           | N/A                       |
| <b>Sub-total</b>                                    | <b>\$281,580.00</b>         | <b>\$260,100.00</b>   | N/A                          | <b>\$0.00</b> | N/A                       |
| <b>Total for all systems</b>                        | <b>\$1,115,374.00</b>       | <b>\$1,052,395.00</b> | N/A                          | <b>\$0.00</b> | N/A                       |

### Components

Information not provided.

Cost  
Information

Antennas

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

| Description                                                                                                               | Predetermined<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification | Actual<br>Cost | Actual Cost<br>Justification |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Primary<br>Antenna TAD-<br>20UDA 4/40                                                                                     | \$96,130.00                    | \$91,400.00       |                                    | \$0.00         |                              |
| UHF - Lower<br>Power Side<br>Mount, One<br>station antenna<br>- medium power<br>(50-200 kW),<br>horizontally<br>polarized | \$89,400.00                    | \$85,000.00       | N/A                                | N/A            | N/A                          |
| Sweep test of<br>existing antenna                                                                                         | \$6,730.00                     | \$6,400.00        | N/A                                | N/A            | N/A                          |
| Sub-total                                                                                                                 | \$96,130.00                    | \$91,400.00       | N/A                                | \$0.00         | N/A                          |
| Total for all<br>systems                                                                                                  | \$1,115,374.00                 | \$1,052,395.00    | N/A                                | \$0.00         | N/A                          |

Components

Information not provided.

Cost  
Information

Transmission Line

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

| Description                                       | Predetermined<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification | Actual<br>Cost | Actual Cost<br>Justification |
|---------------------------------------------------|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Primary<br>Transmission<br>Line                   | \$202,960.00                   | \$194,160.00      |                                    | \$0.00         |                              |
| Interim Line                                      | <i>\$25,200.00</i>             | \$25,200.00       | N/A                                | N/A            | N/A                          |
| Rigid<br>Transmission<br>Line - copper, 6<br>1/8" | \$177,760.00                   | \$168,960.00      | N/A                                | N/A            | N/A                          |
| Sub-total                                         | \$202,960.00                   | \$194,160.00      | N/A                                | \$0.00         | N/A                          |
| Total for all<br>systems                          | \$1,115,374.00                 | \$1,052,395.00    | N/A                                | \$0.00         | N/A                          |

Components

Information not provided.

Cost  
Information

Tower Equipment and Rigging Costs

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

| Description                                                       | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|-------------------------------------------------------------------|-----------------------------|----------------|------------------------------|-------------|---------------------------|
| Primary Tower TOWER                                               | \$461,100.00                | \$442,000.00   |                              | \$0.00      |                           |
| Interim antenna rigging                                           | <i>\$80,000.00</i>          | \$80,000.00    | N/A                          | N/A         | N/A                       |
| Tall Tower (greater than 500')                                    | \$210,500.00                | \$200,000.00   | N/A                          | N/A         | N/A                       |
| Minor tower reinforcement /modifications                          | \$158,000.00                | \$150,000.00   | N/A                          | N/A         | N/A                       |
| Structural engineering tower load study for well documented tower | \$12,600.00                 | \$12,000.00    | N/A                          | N/A         | N/A                       |
| Sub-total                                                         | \$461,100.00                | \$442,000.00   | N/A                          | \$0.00      | N/A                       |
| Total for all systems                                             | \$1,115,374.00              | \$1,052,395.00 | N/A                          | \$0.00      | N/A                       |

Components

Information not provided.

## Cost Information

### Outside Professional Services

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

| Description                                                                          | Predetermined Cost Estimate | Estimated Cost     | Estimated Cost Justification | Actual Cost   | Actual Cost Justification |
|--------------------------------------------------------------------------------------|-----------------------------|--------------------|------------------------------|---------------|---------------------------|
| <b>Outside Professional Services</b>                                                 | <b>\$55,414.00</b>          | <b>\$52,150.00</b> |                              | <b>\$0.00</b> |                           |
| Prepare and or review reimbursement form                                             | \$2,630.00                  | \$2,500.00         | N/A                          | N/A           | N/A                       |
| Perform engineering study for new channel assignment and antenna development         | \$7,360.00                  | \$7,000.00         | N/A                          | N/A           | N/A                       |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00                  | \$3,000.00         | N/A                          | N/A           | N/A                       |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application    | \$1,580.00                  | \$1,500.00         | N/A                          | N/A           | N/A                       |
| Prepare request for Special Temporary Authorization                                  | \$2,050.00                  | \$1,500.00         | N/A                          | N/A           | N/A                       |

|                                                                                                          |                |                |     |        |     |
|----------------------------------------------------------------------------------------------------------|----------------|----------------|-----|--------|-----|
| Attorney Fees -<br>Prepare and File<br>FCC Form 2100<br>(main),<br>Construction<br>Permit<br>Application | \$5,260.00     | \$5,000.00     | N/A | N/A    | N/A |
| Attorney Fees -<br>Prepare and File<br>FCC Form 2100<br>(main), License<br>to Cover<br>Application       | \$2,365.00     | \$2,250.00     | N/A | N/A    | N/A |
| Attorney Fees -<br>Prepare and File<br>request for<br>Special<br>Temporary<br>Authorization              | \$3,680.00     | \$3,500.00     | N/A | N/A    | N/A |
| Project<br>management of<br>the transition                                                               | \$27,334.00    | \$25,900.00    | N/A | N/A    | N/A |
| <b>Sub-total</b>                                                                                         | \$55,414.00    | \$52,150.00    | N/A | \$0.00 | N/A |
| <b>Total for all<br/>systems</b>                                                                         | \$1,115,374.00 | \$1,052,395.00 | N/A | \$0.00 | N/A |

## Components

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>\$18,190.00</b>          | <b>\$12,585.00</b> |                                                               | <b>\$0.00</b> |                           |
| MVPD Notification of Channel Change                                      | <i>\$1,500.00</i>           | \$1,500.00         | N/A                                                           | N/A           | N/A                       |
| Develop and air announcement of upcoming channel change                  | <i>\$1,500.00</i>           | \$1,500.00         | Develop and produce spots and crawls for viewer notification. | N/A           | N/A                       |
| Equipment Storage                                                        | <i>\$1,000.00</i>           | \$1,000.00         | N/A                                                           | N/A           | N/A                       |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$500.00</i>             | \$500.00           | N/A                                                           | N/A           | N/A                       |
| Local Zoning                                                             | <i>\$500.00</i>             | \$500.00           | N/A                                                           | N/A           | N/A                       |
| FCC Filing Fees - Special Temporary Authorization request                | \$195.00                    | \$190.00           | N/A                                                           | N/A           | N/A                       |
| FCC Filing Fees - Form 2100 license to cover application                 | \$335.00                    | \$325.00           | N/A                                                           | N/A           | N/A                       |
| FCC Filing Fees - Form 2100 minor change CP application                  | \$1,110.00                  | \$1,070.00         | N/A                                                           | N/A           | N/A                       |

|                                         |                |                |     |        |     |
|-----------------------------------------|----------------|----------------|-----|--------|-----|
| DTV Medical<br>Facility<br>Notification | \$11,550.00    | \$6,000.00     | N/A | N/A    | N/A |
| <b>Sub-total</b>                        | \$18,190.00    | \$12,585.00    | N/A | \$0.00 | N/A |
| <b>Total for all<br/>systems</b>        | \$1,115,374.00 | \$1,052,395.00 | N/A | \$0.00 | N/A |

## Components

Information not provided.

| Cost Information      | Grand Total                 |                |             |
|-----------------------|-----------------------------|----------------|-------------|
|                       | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
| Total for all systems | \$1,115,374.00              | \$1,052,395.00 | \$0.00      |

| 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>Elizabeth<br/>Ryder</b><br/><i>General<br/>Counsel</i></p> <p>08/14/2017</p> |

## Attachments