



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **64048** | Service: **DCA** | Call **KNOV-CD** | Channel: **31 (UHF)** |
ID:
File **0000027971** | Sign:
Number:
FRN: **0004941621** | Date **01/08**
Submitted: **/2018**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|--|---|--------------------------|------------------------------------|----------------|
| BEACH TV PROPERTIES, INC. Doing Business As: BEACH TV PROPERTIES, INC. | Byron J. Colley, Jr. PO Box SUITE 23 PANAMA CITY, FL 32407 United States | +1 (850) 234- 2773 | jud. colley@tripsmarter. com | Corporation |

Reimbursement Contact Information

Reimbursement Contact Name and Information

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

Preparer Contact Information

Preparer Contact Name and Information

| Applicant | Address | Phone | Email |
|--|---------|-------|-------|
| 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. | No |
| Briefly describe transition plan | KNOV will transition to channel 25, to maintain signal to head ends, a second antenna will be mounted near the current antenna and will become the main antenna. A new transmitter and mask filter are required. An interim transmitter is required. |

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 | Purchase New |
| | Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is this transmitter currently shared with another station? | No |
| | Is this transmitter currently in operating condition? | Yes |
| Existing Transmitter Manufacturer and Type | Manufacturer | |
| | Model | ATSC-1.6 KW |
| | Year | 2017 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 1.6 kW |

**Primary
Transmitter**

New Transmitter Costs

| Section | Question | Response |
|-----------------|---|--|
| New Transmitter | Use | Primary (Main) |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | No |
| | Manufacturer | |
| | Model | TMx9 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power capacity | 1.2 kW |
| | Justification for New Transmitter | Transmitter is needed in order to maintain continuous service during the transition. |

**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 | 120/240 |
| HVAC Service | Does the replacement transmitter require HVAC Service? | No |
| | Type | N/A |
| | Size | N/A |
| | Other Size | N/A |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leasehold improvement? | No |
| | Size | N/A |
| Channel 14 Costs | Is an RF Consulting Engineer needed? | N/A |
| | Is a channel 14 Mask Filer needed? | N/A |
| | Is additional field engineering time needed? | N/A |
| | Number of Days | N/A |

Primary Transmitter

Other Transmitter Cost Not Listed

| Name | Description |
|-------------|----------------------------|
| Mask Filter | Rhode & Swartz UT6E7F-1.5K |

Antennas

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

Primary Antenna

Existing Antenna Information

| Section | Question | Response |
|---|--|--------------------|
| Existing Antenna Description | Type of change | Purchase New |
| | Antenna Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is the existing antenna shared with another station or stations? | No |
| | Is the existing antenna directional? | No |
| | Is antenna in operating condition? | Yes |
| | Is antenna located on or in close proximity to an antenna farm? | No |
| Existing Antenna Manufacturer and Type | Class | Class A |
| | Mounting | Top Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | Type | Slotted Coaxial |
| | Number of Stations Supported | N/A |
| | Number of Panels | N/A |
| | Design power capacity in use | N/A |
| | Lower Limit | N/A |
| | Upper Limit | N/A |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 3.2 kW |
| | | |

| | |
|--------------|---------|
| Manufacturer | |
| Model | 770-881 |
| Year | 2003 |

Primary
Antenna

New Antenna Costs

| Section | Question | Response |
|------------------------------------|--|-----------------|
| New Antenna Description | Use | Primary (Main) |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | No |
| | Ownership | Owned |
| | Owner | N/A |
| | Is antenna shared? | No |
| | Is antenna directional? | No |
| | Will antenna be located on or in close proximity to an antenna farm? | No |
| New Antenna Manufacturer and Types | Class | Class A |
| | 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) | 3.2 kW |
| | Manufacturer | |
| | | |

| | |
|-------------------------------|--------------------------------|
| Model | PSILP16BF-31 |
| Year | 2017 |
| Justification for New Antenna | Old antenna cannot be retuned. |

Primary Antenna

Other Antenna Costs

| Section | Question | Response |
|------------------------------------|---|----------|
| Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | No |
| | Type | |
| | Number of channels supported | N/A |
| | Frequencies of channels supported | N/A |
| | Frequency | N/A |
| | Do you need a combiner output splitter /switcher for dual feed lines? | N/A |
| Elbow Complex | Do you require the separate purchase of the Elbow Complex? | No |
| | Broadband or Single Channel? | N/A |
| | Feed Line Size | N/A |
| Side Mount Brackets | Do you require the separate purchase of side mount brackets for a high power antenna? | No |
| Pattern Scatter Analysis | Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna? | No |
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | Yes |

| Primary Antenna | Other Antenna Cost Not Listed |
|--------------------|-------------------------------|
| | Information not provided. |

**Interim
Antenna**

New Antenna Costs

| Section | Question | Response |
|--|--|--------------------|
| New Antenna Description | Use | Interim |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Ownership | Owned |
| | Owner | N/A |
| | Is antenna shared? | No |
| | Is antenna directional? | No |
| | Will antenna be located on or in close proximity to an antenna farm? | No |
| New Antenna Manufacturer and Type | Class | Class A |
| | Mounting | Top Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | Type | Slotted Coaxial |
| | Number of Stations Supported | N/A |
| | Number of Panels/Bays | N/A |
| | Lower Limit | N/A |
| | Upper Limit | N/A |
| | Design power capacity in use | N/A |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 3.2 kW |
| | Manufacturer | |
| | Model | PSILP16BF- 31 |
| | Year | 2017 |

| | | |
|--|-------------------------------|---|
| | Justification for New Antenna | Need antenna to maintain service during transition. |
|--|-------------------------------|---|

Interim Antenna

Other Antenna Costs

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

Interim Antenna

Other Antenna Cost Not Listed

| Name | Description |
|-------------------|---|
| Roof rent | Additional cost for lease of transmitter and antenna space. |
| Tower crew | Remove and replace antennas. |

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 | 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 |
| Existing Transmission Line Manufacturer and Type | Manufacturer | |
| | Type | Flexible Foam |
| | Diameter | 1 5/8 inches |
| | Other Diameter | N/A |
| | Segment Length | N/A |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 100 feet per run |

Primary
Transmission Line

New Transmission Line

| Section | Question | Response |
|-----------------------------|---|---|
| New Transmission Line Costs | Use | Primary (Main) |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | No |
| | Type | Flexible Air |
| | Diameter | 1 5/8 inches |
| | Other Diameter | N/A |
| | Segment Length | N/A |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 100 feet per run |
| | Justification for New Transmission Line | Need transmission line for the new antenna. |

Primary
Transmission Line

Other Transmission Line Expenses Not Listed

Information not provided.

Interim
Transmission Line

New Transmission Line

| Section | Question | Response |
|------------------------------------|---|---|
| New Transmission Line Costs | Use | Interim |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Type | Flexible Air |
| | Diameter | 1 5/8 inches |
| | Segment Length | N/A |
| | Other Segment Length | |
| | Number of parallel runs | 1 |
| | Length | 100 feet per run |
| | Justification for New Transmission Line | Need transmission line for new antenna. |

Interim
Transmission Line

Other Transmission Line Expenses Not Listed

Information not provided.

**Tower
Equipment
And
Rigging
Costs**

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

**Outside
Professional**

| Section | Question | Response |
|---|--|--|
| Services Costs Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 25 |
| | Explanation | Have no ability to conduct internally. |
| Outside RF consulting Engineering Services | Perform engineering study for new channel assignment and antenna development | Yes |
| | Prepare engineering section of Form FCC Construction Permit Application | Yes |
| | For Auxiliary Facility | Yes |
| | For Main Facility | Yes |
| | Prepare engineering section of 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 |
| | Do you have Distributed Transmission System engineering services? | N/A |
| | Critical Facility | N/A |
| | Terrain-Shielded Facility | N/A |
| Attorney and Other Outside Consulting Services | Prepare and file Form FCC Construction Permit Application | Yes |
| | For Auxiliary Facility | 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 | No |
| RF Field Engineering Services | Comprehensive coverage verification via field study | No |
| | RF exposure measurements | No |
| | Additional Field Engineering Service | No |
| | Number of Days | N/A |
| | Justification | N/A |

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

| Name | Description |
|-------------------------------|---|
| Thomaston Broadcasting | KNOV 8 hr. x \$40/hr. 320. Preparation of 399. |
| Mike Minturn | MVPD property installs. 125 properties @ 3 hrs/property. 375 hrs. x \$35/hr. \$13,125. |
| Thomaston Broadcasting | Transmitter and antenna work. 80 hr x \$40 /hr. \$3,200. MVPD property installs. 125 properties @ 3 hrs/property. 375hrs. x\$40 /hr. \$15,000 |

Other Expenses

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

**Other
Expenses**

Other Expenses Not Listed

| Name | Description |
|----------------|--|
| Upgrade Hotels | Antennas and processors in each of 125 hotels have to be replaced. |

Cost
Information

Transmitters

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|---|-----------------------------|----------------|------------------------------|-------------|---------------------------|
| Primary Transmitter TMx9 | \$135,101.00 | \$67,296.00 | | \$16,200.24 | |
| Mask Filter | <i>\$4,101.00</i> | \$4,101.00 | N/A | N/A | N/A |
| Other Electrical Service: 120 /240 | <i>\$5,000.00</i> | \$5,000.00 | N/A | N/A | N/A |
| UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW | \$126,000.00 | \$58,195.00 | N/A | \$16,200.24 | N/A |
| Sub-total | \$135,101.00 | \$67,296.00 | N/A | \$16,200.24 | N/A |
| Total for all systems | \$465,777.50 | \$394,617.50 | N/A | \$19,320.24 | N/A |

Components

| Actual Information | |
|------------------------------------|---------------------------|
| Description | File Name |
| Mask Filter | Information not provided. |
| Other Electrical Service: 120 /240 | Information not provided. |

UHF - Air Cooled Solid State
Transmitter 1 - 2.5 kW

Component Description:

Second 1/3 due
before shipping.

Amount:

\$16,200.24

Component Description:

1/3 Down
payment, invoice
does not include
tax and freight
which are
included in the
attached quote.

Amount:

\$14,700.24

Cost Information

Antennas

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|---|-----------------------------|--------------------|------------------------------|---------------|---------------------------|
| Interim Antenna PSILP16BF-31 | \$56,730.00 | \$56,400.00 | | \$0.00 | |
| Tower crew | <i>\$15,000.00</i> | \$15,000.00 | N/A | N/A | N/A |
| Roof rent | <i>\$10,000.00</i> | \$10,000.00 | N/A | N/A | N/A |
| UHF - Lower Power, Top Mount, Class A, basic slot antenna, 3 kW input, horizontally polarized | <i>\$25,000.00</i> | \$25,000.00 | N/A | N/A | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
| Primary Antenna PSILP16BF-31 | \$31,331.50 | \$31,001.50 | | \$0.00 | |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
| UHF - Lower Power, Top Mount, Class A, basic slot antenna, 3 kW input, elliptically or circularly polarized | <i>\$24,601.50</i> | \$24,601.50 | N/A | N/A | N/A |
| Sub-total | \$88,061.50 | \$87,401.50 | N/A | \$0.00 | N/A |

| | | | | | |
|------------------------------|--------------|--------------|-----|-------------|-----|
| Total for all systems | \$465,777.50 | \$394,617.50 | N/A | \$19,320.24 | N/A |
|------------------------------|--------------|--------------|-----|-------------|-----|

Components

Information not provided.

Cost
Information

Transmission Line

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|-----------------------------|----------------|------------------------------|-------------|---------------------------|
| Interim Transmission Line | \$3,300.00 | \$3,100.00 | | \$0.00 | |
| Flexible Air Transmission Line - dielectric, 1 5 /8" | \$3,300.00 | \$3,100.00 | N/A | N/A | N/A |
| Primary Transmission Line | \$3,300.00 | \$3,100.00 | | \$0.00 | |
| Flexible Air Transmission Line - dielectric, 1 5 /8" | \$3,300.00 | \$3,100.00 | N/A | N/A | N/A |
| Sub-total | \$6,600.00 | \$6,200.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$465,777.50 | \$394,617.50 | N/A | \$19,320.24 | 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 BANT | \$0.00 | \$0.00 | | \$0.00 | |
| Sub-total | \$0.00 | \$0.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$465,777.50 | \$394,617.50 | N/A | \$19,320.24 | 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 |
|--|-----------------------------|--------------------|------------------------------|-------------------|---------------------------|
| Outside Professional Services | \$65,520.00 | \$63,825.00 | | \$3,120.00 | |
| Mike Minturn | <i>\$13,125.00</i> | \$13,125.00 | N/A | N/A | N/A |
| Thomaston Broadcasting | <i>\$18,200.00</i> | \$18,200.00 | N/A | \$640.00 | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application | \$2,365.00 | \$2,250.00 | N/A | N/A | N/A |
| Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application | \$4,210.00 | \$4,000.00 | N/A | \$1,740.00 | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$5,000.00 | N/A | N/A | N/A |

| | | | | | |
|---|------------|------------|-----|----------|-----|
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | \$0.00 | N/A |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | N/A | N/A |
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application | \$2,105.00 | \$2,000.00 | N/A | \$0.00 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | N/A | N/A |
| Project management of the transition | \$3,950.00 | \$3,750.00 | N/A | N/A | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | \$740.00 | N/A |

| | | | | | |
|--|--------------|--------------|-----|-------------|-----|
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | N/A | \$0.00 | N/A |
| Sub-total | \$65,520.00 | \$63,825.00 | N/A | \$3,120.00 | N/A |
| Total for all systems | \$465,777.50 | \$394,617.50 | N/A | \$19,320.24 | N/A |

Components

| Actual Information | |
|--|--|
| Description | File Name |
| Mike Minturn | Information not provided. |
| Thomaston Broadcasting | <p>Component Description: Getting quotes for equipment and assisting 399 filing.</p> <p>Amount: \$640.00</p> |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application | <p>Component Description: Prepare minor change application</p> <p>Amount: \$1,740.00</p> |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | Information not provided. |

| | | |
|--|---|---|
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application | Component Description: Amount: | Review antenna and system data. \$1,500.00 |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. | |
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application | Component Description: Amount: | Prepare Form 387. \$175.00 |
| Perform engineering study for new channel assignment and antenna development | Information not provided. | |
| Project management of the transition | Information not provided. | |
| Prepare and or review reimbursement form | Component Description: Amount: | Form 399 research. \$740.00 |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Component Description: Amount: | Review FCC filing process. \$337.50 |

Cost Information

Other Expenses

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|-----------------------------|---------------------|---|---------------|---------------------------|
| Other Expenses | \$170,495.00 | \$169,895.00 | | \$0.00 | |
| Upgrade Hotels | <i>\$125,000.00</i> | \$125,000.00 | N/A | N/A | N/A |
| MVPD Notification of Channel Change | <i>\$5,000.00</i> | \$5,000.00 | Must notify 125 hotels who receive our signal in their SMATV systems. | N/A | N/A |
| Develop and air announcement of upcoming channel change | <i>\$2,500.00</i> | \$2,500.00 | 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>\$15,000.00</i> | \$15,000.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$5,000.00</i> | \$5,000.00 | N/A | N/A | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | 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 |
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$325.00 | N/A | N/A | N/A |
| Sub-total | \$170,495.00 | \$169,895.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$465,777.50 | \$394,617.50 | N/A | \$19,320.24 | N/A |

Components

Information not provided.

| | | | |
|-----------------------------|------------------------------|--|-----------------------|
| Cost Information | Grand Total | | |
| | | Predetermined Cost Estimate | Estimated Cost |
| | | | Actual Cost |
| | Total for all systems | \$465,777.50 | \$394,617.50 |
| | | | \$19,320.24 |

| | | |
|-----------------------------|--|-----------------|
| 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"> 1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. | |

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

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|---|--|
| <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>Jud Colley <i>Owner</i> 01/08/2018</p> |

| Certification | Section | Question | Response |
|---------------|--|--|----------|
| | Submission of Actual Cost Documentation Statements | WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR 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). | |
| | | <ol style="list-style-type: none"> 1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct. 3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. | |

4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD) .
6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

| | |
|--|--|
| <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>Jud Colley <i>Owner</i></p> <p>01/08/2018</p> |

Attachments