

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility ID:		Service: DTV	Call Sign:	WPXX-TV	Channel: 33 (UHF)
File	000002	8492			
Number:					
FRN: 00	30297451	Date	02/13		
		Submitted:	/2018		

Applicant Name, Type, and Contact Information

Applicant Information

Applica	int	Address	Phone	Email	Applicant Type
INC. Doing E ION ME	HIS LICENSE, Business As:	Michael Hubner 810 Seventh Avenue 31st Floor NEW YORK, NY 10019 United States	+1 (212) 603- 8407	MichaelHubner@ionmedia. com	Corporation

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer	Preparer Contact Name and Information	ame and Information		
Contact Information	Applicant	Address	Phone	Email
	The Preparer is same as the reimbursement contact.			

Broadcaster	Question	Response
Information and Transition Plan	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	Operate from current side mounted digital antenna while a new top mounted antenna is installed for post repack channel. Remove top mount analog antenna. Replace transmission line and non re- tuneable transmitter for operation on post repack channel.

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

Primary	Existing Transmitter Information				
Transmitter	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			
	Manufacturer and Type	Model	DCX		
		Year	2002		
		Туре	Inductive Output Tube		
		IOT Power Type	Three		
		Power Capacity	60 kW		

Existing Transmitter Information

Primary	New Transmitter Costs					
Transmitter	Section	Question	Response			
	New Transmitter	Use	Primary (Main)			
		Change Type	Purchase New			
		Is this a request for upgraded equipment?	Yes			
		Manufacturer				
		Model	THU9-30 EVO			
		Transmitter Type	Solid State			
		Solid State Cooling	Liquid Cooled			
		Solid State Power capacity	46 kW			
		Justification for New Transmitter	See attached Transmitter Exhibits. See attached Transmitter Upgrade Disclaimer			

Other Transmitter Costs

Primary	Other Transmitter Costs				
Transmitter	Section	Question	Response		
	Electrical Service	Service Entrance (3 phases 800A 208V)	No		
		Switchgear (industrial 800 amp)	No		
		Transformer (480V)	Yes		
		Power	500 kVA		
		Rigid Conduit and Wiring	No		
		Size	N/A		
			1		

	Length	N/A
	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Туре	Cooling Only
	Size	5 tons
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

Other Transmitter Cost Not Listed

Primary	Other Transmitter Cost Not Listed			
Transmitter Name	Name	Description		
	RF Interconnect	Interconnect between RF system and transmission Line		
	Removal of Existing Equipment	Removal of existing transmitters and equipment / Site Prep		

Antennas Section		Question	Response
Antenna Rela	ated Expenses	Do you have antenna related expenses?	Yes

Primary	Existing Antenna Information				
Antenna	Section	Question	Response		
	Existing Antenna Description	Type of change	Purchase New		
		Antenna Use	Primary (Main)		
		Description of Use	N/A		
		Ownership	Owned		
		Owner	N/A		
		Site	N/A		
		Is the existing antenna shared with another station or stations?	No		
		Is the existing antenna directional?	No		
		Is antenna in operating condition?	Yes		
		Is antenna located on or in close proximity to an antenna farm?	No		
	Existing Antenna Manufacturer and Type	Class	Full Power		
		Mounting	Side Mount		
		Antenna position in stack	Not in Stack		
		Polarization	Horizontal		
		Туре	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)	1000.0 kW		

Manufacturer	
Model	TFU- 28DSC-R04
Year	2002

Primary	New Antenna Costs				
Antenna	Section	Question	Response		
	New Antenna Description	Use	Primary (Main)		
		Description of Use	N/A		
		Change Type	Purchase New		
		Is this a request for upgraded equipment?	Yes		
		Ownership	Owned		
		Owner	N/A		
		Is antenna shared?	No		
		Is antenna directional?	No		
		Will antenna be located on or in close proximity to an antenna farm?	No		
	New Antenna Manufacturer and Types	Class	Full Power		
		Mounting	Top Mount		
		Antenna position in stack	Not in Stack		
		Polarization	Elliptical		
		Туре	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)	537.0 kW		
		Manufacturer			
			1		

Model	TFU-24JTH /VP-R-O6
Year	2017
Justification for New Antenna	See attached Antenna Exhibit

Primary	Other Antenna Costs		
Antenna	Section	Question	Response
	Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
		Туре	
		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?	Yes
		Broadband or Single Channel?	Single Channel
		Feed Line Size	6 1/8 inches inches
	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

Other Antenna Costs

Primary
AntennaOther Antenna Cost Not ListedInformation not provided.

Transmissior	n Seffien	Question	Response
	Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

ransmissio	n 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	
		Туре	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	1110 feet per run

Primary Existing Transmission Line

Primary	New Transmission Line			
Transmissio	n 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	
		Туре	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	1110 feet per run	
		Justification for New Transmission Line	See attached Antenna Exhibit.	

Other Transmission Line Expenses Not Listed Primary Other Transmission Line Description

Name	Description
Sweep existing transmission line	Sweep existing transmission line

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

marv	Existing	Tower
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Primary	Existing Tower			
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?	No	
	Existing Tower Structure Registration	Do you have a tower registration number?	Yes	
		ASR Number	1043762	
	Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	35° 12' 41.0" N-	
		Longitude (NAD83)	089° 48' 54.0" W-	
		Overall Structure Height	1069.54 feet	
		Support Structure Height	1069.54 feet	
		Ground Elevation Above Mean Sea Level (AMSL)	278.87 feet	

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	ION MEDIA MEMPHIS LICENSE, INC.
Date Constructed	01/01/1994

Tower Modification Costs Primary Tower

Tower

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:	Major Reinforcements needed

Tower Rigging Costs Primary

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

Other Tower Expenses Not Listed Primary Tower Information not provided.

Outside	Section	Question	Response
Professional	I Services Costs Outside Project Management Services	Do you require outside project management services?	No
		Number of Hours	N/A
		Explanation	N/A
	Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
		Prepare engineering section of Form FCC Construction Permit Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes
		Prepare engineering section of Form FCC License to Cover Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes
		Prepare request for Special Temporary Authority	Yes
		Quantity	1
		Do you have Distributed Transmission System engineering services?	N/A
		Critical Facility	N/A
		Terrain-Shielded Facility	N/A
	Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes
		Prepare and file Form FCC License to Cover Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes
			-

	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	Yes
	Environmental Assessment	Yes
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	Negotiation of Lease and other Matter for Shared Locations	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Other Professional Services Expenses Not Listed Professional Services roopstsided.

Other	Section	Question	Response
Expenses	AM Pattern Disturbance	Is an Impact Study needed?	Yes
		Is Remediation needed?	No
	Facility Expenses	Name	N/A
		Other Distributed Transmission System Expenses Not listed	N/A
		Name	N/A
		Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
	Permit and Filing Costs	Local Zoning	Yes
		Non-zoning permits	Yes
		BLM or NFS Coordination	No
		FCC Construction Permit Minor Change	No
		FCC License to Cover Application	Yes
		FCC Special Temporary Authority Application	Yes
	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 Not Listed

Expenses Information not provided.

Transmitters

Cost Information

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 THU9-30 EVO	\$1,591,650.00	\$1,251,355.00		\$0.00	
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,136,105.00	See attached Rohde and Schwarz Transmitter Quote.	N/A	N/A
Transformer 3 phase /480v - 500 KVA	\$48,400.00	\$46,000.00	N/A	N/A	N/A
5 Ton system	\$20,250.00	\$19,250.00	See attached HVAC Exhibit.	N/A	N/A
RF Interconnect	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Removal of Existing Equipment	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Sub-total	\$1,591,650.00	\$1,251,355.00	N/A	\$0.00	N/A
Total for all systems	\$3,032,080.00	\$2,494,731.00	N/A	\$300,742.81	N/A

Components

Information not provided.

Antennas

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna TFU-24JTH /VP-R-O6	\$308,530.00	\$211,292.00		\$85,894.92	
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$11,700.00	N/A	\$7,418.07	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$2,880.00	N/A
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$193,192.00	V-Pol cost not included in reimbursement request. See attached Dielectric quote and estimated cost for shipping and taxes exhibit.	\$75,596.85	N/A
Sub-total	\$308,530.00	\$211,292.00	N/A	\$85,894.92	N/A
Total for all systems	\$3,032,080.00	\$2,494,731.00	N/A	\$300,742.81	N/A

Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed) Amount: Component Descripti Amount: Sweep test of existing antenna Component Descripti	
per 6 1/8. feedline (if needed) Amount: Component Description Amount: Sweep test of existing antenna	
needed) Amount: Component Descripti Amount: Sweep test of existing antenna	on: 45% "down
Amount: Component Descripti Amount: Sweep test of existing antenna	payment" for
Component Description	primary flange. In
Component Description	filing the Form 399,
Component Description	ION assumed the
Component Description	cost of the primary
Component Description	flange would be
Component Description	included in this
Component Description	category.
Component Description	Supporting
Component Description	documentation
Component Description	attached. This
Component Description	invoice has been
Component Description	paid.
Amount: Sweep test of existing	\$2,783.97
Amount: Sweep test of existing	
Sweep test of existing	on: 45% "down
Sweep test of existing	payment" for
Sweep test of existing	primary elbow
Sweep test of existing	complex.
Sweep test of existing	Supporting
Sweep test of existing	documentation
Sweep test of existing	attached. This
Sweep test of existing	invoice has been
Sweep test of existing	paid.
antenna	\$4,634.10
antenna Component Descripti	
	on: 45% "down
	payment" for
	repack sweep of
	primary operations.
	Supporting
	documentation
	attached. This
	invoice has been
	paid.
Amount:	\$2,880.00

UHF - High Power Top Mount (200-1000 kW), One		
station antenna, elliptically	Component Description:	45% "down
or circularly polarized		payment" for
		primary antenna.
		Supporting
		documentation
		attached. This
		invoice has been
		paid.
	Amount:	\$75,596.85

Transmission Line

Cost Information

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 Transmission Line	\$230,620.00	\$180,819.00		\$75,045.92	
Rigid Transmission Line - copper, 6 1/8"	\$224,220.00	\$174,419.00	See attached Dielectric Top Mount Antenna Quote and Estimated Costs for Shipping and Taxes exhibit.	\$75,045.92	N/A
Sweep existing transmission line	\$6,400.00	\$6,400.00	N/A	N/A	N/A
Sub-total	\$230,620.00	\$180,819.00	N/A	\$75,045.92	N/A
Total for all systems	\$3,032,080.00	\$2,494,731.00	N/A	\$300,742.81	N/A

Components

Actual Information	
Description	File Name

Rigid Transmission Line - copper, 6 1/8"	Component Description:	45% "down payment" for primary transmission line. Supporting documentation attached. This invoice has been paid. \$75,045.92
Sweep existing transmission line	Information not provided.	

Tower Equipment and Rigging Costs

Cost Information

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	\$644,100.00	\$612,000.00		\$134,964.00	
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	\$134,964.00	N/A
Major tower reinforcement /modifications	\$421,000.00	\$400,000.00	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	\$644,100.00	\$612,000.00	N/A	\$134,964.00	N/A
Total for all systems	\$3,032,080.00	\$2,494,731.00	N/A	\$300,742.81	N/A

Components

Actual Information	
Description	File Name

500')		
	Component Description:	10% "deposit" for tower service. Cos breakdown and supporting documentation attached. This invoice has been paid.
	Amount:	, \$17,995.20
	Component Description:	65% "mobilization"
		payment for tower service. Cost
		breakdown and supporting
		documentation attached.
	Amount:	\$116,968.80
Major tower reinforcement /modifications	Information not provided.	
Structural engineering tower load study for well documented tower	Information not provided.	

Outside Professional Services

Cost Information

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	\$161,210.00	\$152,750.00		\$4,837.97	
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$2,000.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	\$10,520.00	\$10,000.00	N/A	N/A	N/A

NEPA Section 106 environmental review, if needed	\$6,310.00	\$6,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	N/A	N/A	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 - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$4,837.97	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A

Address transition timing and coordination issues w/ other stations and wireless	\$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
Sub-total	\$161,210.00	\$152,750.00	N/A	\$4,837.97	N/A
Total for all systems	\$3,032,080.00	\$2,494,731.00	N/A	\$300,742.81	N/A

Components

Actual Information Description	File Name
RF Exposure Measurements	Information not provided.
Comprehensive coverage verification via field study, if needed	Information not provided.

FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.	
ASR modification (prepare FCC Form 854)	Information not provided.	
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	Information not provided.	
NEPA Section 106 environmental review, if needed	Information not provided.	
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.	
Attorney Fees - Negotiation of lease and other matters for shared locations	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description:	Invoice for station's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff and has provided corrected supporting documentation
	Amount:	documentation. \$4,837.97

Prepare request for Special Temporary Authorization	Information not provided.
Prepare and or review reimbursement form	Information not provided.
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.
Perform engineering study for new channel assignment and antenna development	Information not provided.
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Information not provided.
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.

Other Expenses

Cost Information

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	\$95,970.00	\$86,515.00		\$0.00	
MVPD Notification of Channel Change	\$1,000.00	\$1,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$0.00	\$0.00	The amount is yet to be determined (TBD) and ION will submit on-air announcement costs when finalized.	N/A	N/A
Equipment Storage	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$15,000.00	\$15,000.00	N/A	N/A	N/A
Non-zoning permits	\$15,000.00	\$15,000.00	N/A	N/A	N/A

AM Pattern Disturbance Impact study	\$7,890.00	\$7,500.00	As required per the Construction Permit Authorization's Waivers /Special Conditions, a proof of performance study shall be conducted to establish that the AM array (WOWW) has not been adversely affected.	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$2,500.00	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 - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
Local Zoning	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Sub-total	\$95,970.00	\$86,515.00	N/A	\$0.00	N/A
Total for all systems	\$3,032,080.00	\$2,494,731.00	N/A	\$300,742.81	N/A

Components

Information not provided.

Cost Information	Grand Total			
		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$3,032,080.00	\$2,494,731.00	\$300,742.81

Reimbursem	envestianus	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	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.	
		 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. 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).
- The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
- 7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8.	The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.	
an aut named	are, under penalty of perjury, that I am horized representative of the above- d applicant for the Authorization(s) ed above.	Mario Vasquez Vice President - Finance, Operations 02/13/2018

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).	
		 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).
- The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

 8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission. 9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested. 	
I declare, under penalty of perjury, that I am an authorized representative of the above- named applicant for the Authorization(s) specified above.	Mario Vasquez Vice President - Finance, Operations 02/13/2018

Attachments
