



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **64592** | Service: **DTV** | Call **WFLA-TV** | Channel:  
ID: | Sign:  
**7 (High VHF)** | File **0000028513**  
Number:  
FRN: **0009961889** | Date **11/05**  
Submitted: **/2018**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>Nexstar Broadcasting, Inc.</b>	Elizabeth Ryder 545 E. John Carpenter Freeway Suite 700 Irving, TX 75062 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> <i>General Counsel</i> <i>Nexstar Broadcasting, Inc.</i>	Elizabeth Ryder 545 E. John Carpenter Freeway Suite 700 Irving, TX 75062 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.	Yes
Briefly describe transition plan	Replace transmitter, antenna and transmission line. Acquire interim antenna and line for continued operation during construction and duration of the assigned phase. Map and analyze tower; design and implement modifications if required. See attached.

**Transmitters**

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

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	Platinum-i
	Year	1999
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	16 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	TBD
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	20.7 kW
	Justification for New Transmitter	The manufacturer of the existing transmitter advises that the transmitter cannot be re-tuned to the assigned channel. See attachment.

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	Yes

	Size	3 inches
	Length	100.0 feet
	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

**Primary Transmitter**

**Other Transmitter Cost Not Listed**

Name	Description
<b>Additional Interior RF System</b>	Interior RF System Existing Transmitter to Interim Transmission line
<b>Standby Exciter and Switch</b>	Standby Exciter with Automatic Change Over Switch

**Antennas**

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

**Primary  
Antenna**

**Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	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?	Yes
<b>Existing Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	Type	Other
	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	Travelling Wave C-Pol
	ERP: (Effective Radiated Power) .....	32.0 kW

Manufacturer	
Model	TCL-6A7
Year	1999



**Primary  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	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?	Yes
<b>New Antenna Manufacturer and Types</b>	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	36.0 kW
	Manufacturer	
	Model	THV series
	Year	2018

Justification for New Antenna	The existing primary antenna is a single channel travelling wave which cannot accommodate the assigned channel.
-------------------------------	---

## Primary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	3 1/8 inches inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary  
Antenna**

**Other Antenna Cost Not Listed**  
Information not provided.

**Interim  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Interim
	Description of Use	N/A
	Change Type	
	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?	Yes
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Bottom
	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) .....	32.0 kW
	Manufacturer	
	Model	TLS-V8BB
	Year	2018

	Justification for New Antenna	An interim antenna is necessary to keep station on the air during primary antenna replacement and for the duration of the assigned phase. Station will attempt to rent if renting is available at time of acquisition.
--	-------------------------------	--

## Interim Antenna

### Other Antenna Costs

Section	Question	Response
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	S
	Feed Line Size	3 1/8 inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for an antenna?	Yes
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	Yes
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Interim  
Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Transmission Line**

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

**Primary  
Transmission Line**

**Existing Transmission Line**

Section	Question	Response
<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	3 1/8 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1700 feet per run



**Primary**  
**Transmission Line**

**New 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	3 1/8 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1660 feet per run
	Justification for New Transmission Line	The line should be compatible with the assigned channel. A new line is included in case the performance is unacceptable on the assigned channel. The station will utilize the existing line if the sweep tests confirm acceptable performance.

Primary Transmission Line	Other Transmission Line Expenses Not Listed
Information not provided.	

**Interim  
Transmission Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Flexible Air
	Diameter	3 inches
	Segment Length	N/A
	Other Segment Length	
	Number of parallel runs	1
	Length	1500 feet per run
	Justification for New Transmission Line	An interim transmission line is necessary for the interim antenna to keep station on the air during primary antenna replacement and for the duration of the assigned phase. Station will attempt to rent if renting is available at time of acquisition.

Interim	Other Transmission Line Expenses Not Listed
Transmission Line	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

**Primary Tower**

**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Is this tower consider Complex?	Candelabra
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	No
	Others Types of Users	Yes
	Is tower documented for structural analysis?	No
	Is tower compliant with Rev G?	Yes
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1028292
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	27° 50' 33.0" N-
	Longitude (NAD83)	082° 15' 44.0" W-
	Overall Structure Height	1572.82 feet
	Support Structure Height	1499.00 feet
	Ground Elevation Above Mean Sea Level (AMSL)	75.13 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	Tampa Tower General Partnership
	Date Constructed	01/01/1987

### Other Types of Users

#### Users

Many RPU ant

Many microwave

### Primary Tower

### Tower Modification Costs

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

### Primary Tower

### Tower Rigging Costs

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

Primary Tower	Other Tower Expenses Not Listed
	Information not provided.

**Outside  
Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	299
	Explanation	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. Internal accounting and Project management.
<b>Outside RF consulting 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	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	No

RF exposure measurements	No
Additional Field Engineering Service	Yes
Number of Days	17
Justification	It will be necessary to survey the site, plan the equipment, develop specifications for purchasing, and oversee multiple vendor RF projects. Station does not have available personnel or personnel trained in such services.

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

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

**Other  
Expenses**

**Other Expenses Not Listed**

Name	Description
Sales Tax	Sales and use tax on goods and services

## 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 TBD</b>	<b>\$694,950.00</b>	<b>\$665,500.00</b>		<b>\$0.00</b>	
High VHF - Air Cooled Solid State Transmitter 16.6 . 20.7 kW	\$526,000.00	\$500,000.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$4,900.00	N/A	N/A	N/A
Additional Interior RF System	<i>\$75,000.00</i>	\$75,000.00	N/A	N/A	N/A
Standby Exciter and Switch	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$694,950.00</b>	<b>\$665,500.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$2,698,647.00</b>	<b>\$2,339,275.00</b>	<b>N/A</b>	<b>\$116,012.46</b>	<b>N/A</b>

### 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 Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Interim Antenna TLS-V8BB</b>	<b>\$100,715.00</b>	<b>\$82,535.00</b>		<b>\$57,361.50</b>	
Pattern scatter analysis for side mount high /med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$5,760.00	Adjusted down from 22,000. See Dielectric quote 700385CMZ-2 attached.	\$5,184.00	N/A
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	\$7,600.00	\$7,400.00	N/A	N/A	N/A

High VHF - High Power Side Mount One Station elliptically or circularly polarized	<b>\$57,975.00</b>	\$57,975.00	Adjusted down from 207,000. See Dielectric quote 700385CMZ- 2 attached.	\$52,177.50	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
<b>Primary Antenna THV series</b>	<b>\$388,330.00</b>	<b>\$387,800.00</b>		<b>\$5,575.00</b>	
High VHF - High Power Top Mount One Station elliptically or circularly polarized	<b>\$374,000.00</b>	\$374,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$5,575.00	N/A
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	\$7,600.00	\$7,400.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$489,045.00</b>	<b>\$470,335.00</b>	N/A	<b>\$62,936.50</b>	N/A

<b>Total for all systems</b>	\$2,698,647.00	\$2,339,275.00	N/A	\$116,012.46	N/A
------------------------------	----------------	----------------	-----	--------------	-----

## Components

<b>Actual Information</b>	
<b>Description</b>	<b>File Name</b>
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	Information not provided.
Side mount brackets for high power antennas (if not included in antenna base cost)	<div> <b>Component Description:</b> Side mount bracket, line 3 of invoice, installment #1 </div> <div> <b>Amount:</b> \$2,592.00 </div> <div> <b>Component Description:</b> Mounting brackets, line 3 of invoice, installment #2 </div> <div> <b>Amount:</b> \$2,592.00 </div>
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	Information not provided.
High VHF - High Power Side Mount One Station elliptically or circularly polarized	<div> <b>Component Description:</b> Antenna component, line 1 of invoice, installment #1 </div> <div> <b>Amount:</b> \$26,088.75 </div> <div> <b>Component Description:</b> Antenna component, line 1 of invoice, installment #2 </div> <div> <b>Amount:</b> \$26,088.75 </div>



Sweep test of existing antenna	Information not provided.
High VHF - High Power Top Mount One Station elliptically or circularly polarized	Information not provided.
Sweep test of existing antenna	<div> <div> <b>Component Description:</b>  <b>Amount:</b> </div> <div> Sweep test  \$5,575.00 </div> </div>
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	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	\$88,500.00	\$84,000.00		\$7,765.76	
Flexible Air Transmission Line - dielectric, 3"	\$88,500.00	\$84,000.00	N/A	\$7,765.76	N/A
Primary Transmission Line	\$172,640.00	\$164,340.00		\$0.00	
Rigid Transmission Line - copper, 3 1/8"	\$172,640.00	\$164,340.00	N/A	N/A	N/A
Sub-total	\$261,140.00	\$248,340.00	N/A	\$7,765.76	N/A
Total for all systems	\$2,698,647.00	\$2,339,275.00	N/A	\$116,012.46	N/A

Components

Actual Information	
Description	File Name

<p>Flexible Air Transmission Line - dielectric, 3"</p>	<table> <tr> <td data-bbox="707 98 1114 315"> <p><b>Component Description:</b></p> </td><td data-bbox="1114 98 1428 315"> <p>Transmission line, lines 4-21 of invoice, installment #2</p> </td></tr> <tr> <td data-bbox="707 315 1114 443"> <p><b>Amount:</b></p> </td><td data-bbox="1114 315 1428 443"> <p>\$3,882.88</p> </td></tr> <tr> <td data-bbox="707 443 1114 660"> <p><b>Component Description:</b></p> </td><td data-bbox="1114 443 1428 660"> <p>Transmission line components, installment #1</p> </td></tr> <tr> <td data-bbox="707 660 1114 685"> <p><b>Amount:</b></p> </td><td data-bbox="1114 660 1428 685"> <p>\$3,882.88</p> </td></tr> </table>	<p><b>Component Description:</b></p>	<p>Transmission line, lines 4-21 of invoice, installment #2</p>	<p><b>Amount:</b></p>	<p>\$3,882.88</p>	<p><b>Component Description:</b></p>	<p>Transmission line components, installment #1</p>	<p><b>Amount:</b></p>	<p>\$3,882.88</p>
<p><b>Component Description:</b></p>	<p>Transmission line, lines 4-21 of invoice, installment #2</p>								
<p><b>Amount:</b></p>	<p>\$3,882.88</p>								
<p><b>Component Description:</b></p>	<p>Transmission line components, installment #1</p>								
<p><b>Amount:</b></p>	<p>\$3,882.88</p>								
<p>Rigid Transmission Line - copper, 3 1/8"</p>	<p>Information not provided.</p>								

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	\$868,300.00	\$575,000.00		\$27,685.00	
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$400,000.00	This is a candelabra tower and the rigging will be complex.	\$11,685.00	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$25,000.00	N/A	\$6,000.00	N/A
Major tower reinforcement /modifications	\$421,000.00	\$150,000.00	This is our share (50%) of the anticipated costs to being the tower into structural conformance to G spec.	\$10,000.00	N/A
Sub-total	\$868,300.00	\$575,000.00	N/A	\$27,685.00	N/A
Total for all systems	\$2,698,647.00	\$2,339,275.00	N/A	\$116,012.46	N/A

## Components

Actual Information	
Description	File Name
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	<b>Component Description:</b> Interim antenna installation, installment #1 <b>Amount:</b> \$11,685.00
Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study	<b>Component Description:</b> Tower analysis <b>Amount:</b> \$6,000.00
Major tower reinforcement /modifications	<b>Component Description:</b> Deposit as agreed per Nexstar Commitment Letter and Coast to Coast Tower Service <b>Amount:</b> \$10,000.00

## Cost Information

### Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Outside Professional Services</b>	<b>\$116,162.00</b>	<b>\$111,600.00</b>		<b>\$17,625.20</b>	
Project management of the transition	\$47,242.00	\$44,850.00	N/A	\$5,125.20	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$3,000.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$2,500.00	N/A
Additional Field Engineering Service, 17 Days	<i>\$34,000.00</i>	\$34,000.00	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	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$7,000.00	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
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	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
<b>Sub-total</b>	\$116,162.00	\$111,600.00	N/A	\$17,625.20	N/A
<b>Total for all systems</b>	\$2,698,647.00	\$2,339,275.00	N/A	\$116,012.46	N/A

## Components

Actual Information	Description	File Name
Project management of the transition	<b>Component Description:</b>	Project management services 7.28.18 through 9.28.18
	<b>Amount:</b>	\$225.00
	<b>Component Description:</b>	Project management services 5.26.18 through 6.29.18
	<b>Amount:</b>	\$225.00
	<b>Component Description:</b>	Project Management for Structural Analysis and Tower Modifications for services from June 30, 2018 through July 27, 2018.
	<b>Amount:</b>	\$375.00
	<b>Component Description:</b>	Prepare FCC Schedule 387, item 6 from invoice summary
	<b>Amount:</b>	\$150.00
	<b>Component Description:</b>	Prepare FCC Schedule 387, item 5 from invoice summary
	<b>Amount:</b>	\$300.00



	<b>Component Description:</b>  <b>Amount:</b>	Project management, item 1 from invoice summary \$1,575.00
	<b>Component Description:</b>  <b>Amount:</b>	Items 7 and 8 from invoice summary \$2,050.20
	<b>Component Description:</b>  <b>Amount:</b>	Project Management for Structural Analysis and Tower Modifications including consultants Kessler and Gehman Associates. Services from January 27, 2018 through February 23, 2018. \$225.00
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<b>Component Description:</b>  <b>Amount:</b>	Prepare FCC Form 2100, item 4 from invoice summary \$3,000.00
Prepare and or review reimbursement form	<b>Component Description:</b>  <b>Amount:</b>	Prepare reimbursement form, item 2 from invoice summary \$2,500.00
Additional Field Engineering Service, 17 Days	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	Information not provided.
Perform engineering study for new channel assignment and antenna development	<div> <div> <b>Component Description:</b> </div> <div> Perform engineering study, item 3 from invoice summary </div> </div> <div> <div> <b>Amount:</b> </div> <div> \$7,000.00 </div> </div>
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.
Prepare request for Special Temporary Authorization	Information not provided.
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	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>\$269,050.00</b>	<b>\$268,500.00</b>		<b>\$0.00</b>	
Sales Tax	<i>\$149,000.00</i>	\$149,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Equipment Storage	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$6,500.00</i>	\$6,500.00	N/A	N/A	N/A
MVPD Notification of Channel Change	<i>\$2,000.00</i>	\$2,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$269,050.00</b>	<b>\$268,500.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>

<b>Total for all systems</b>	\$2,698,647.00	\$2,339,275.00	N/A	\$116,012.46	N/A
------------------------------	----------------	----------------	-----	--------------	-----

## Components

Information not provided.

Cost Information	Grand Total			
		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$2,698,647.00	\$2,339,275.00	\$116,012.46

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 Ryder</b> <i>General Counsel</i></p> <p>11/05/2018</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"> <li>1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	

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

<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Elizabeth Ryder</b> <i>General Counsel</i></p> <p>11/05/2018</p>

## Attachments