



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **24508** | Service: **DTV** | Call **KHSL-TV** | Channel: **36 (UHF)** |  
ID: | Sign:  
File **0000027715**  
Number:  
FRN: **0024763286** | Date **01/22**  
Submitted: **/2019**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>CALIFORNIA TV LICENSE COMPANY, LLC</b>	3282 NORTHSIDE PARKWAY SUITE 275 ATLANTA, GA 30327 United States	+1 (470) 355- 1944	jburgett@wileyrein. com	Limited Liability Company

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address	Phone	Email
The Preparer is same as the reimbursement contact.			

## Broadcaster Information and Transition Plan

Question	Response
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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	Install new primary transmitter and interim side-mount antenna/line for temporary operation on repack channel 36 while install new primary side-mount antenna/line for permanent repack channel 36 operations. Maintain interim antenna as backup.

## 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	NV7500E
	Year	2005
	Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power Capacity	6.5 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	ULXTE12
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	8.5 kW
	Justification for New Transmitter	Current transmitter cannot be re-channelled to meet repack channel assignment and is no longer supported by manufacturer.

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	Yes
	Size	3 inches

	Length	60.0 feet
	Other Electrical Service	Yes
	Description	Installation of electrical services
<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?	Yes
	Size	120.0 square feet
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

**Primary Transmitter**      **Other Transmitter Cost Not Listed**  
Information not provided.

**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?	Yes
	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	Side 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) .....	235.0 kW

Manufacturer	
Model	JA/MS-16SHBP
Year	2005



Primary  
Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Side 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) .....	205.0 kW
	Manufacturer	

Model	ATW16H4- ESPX-36H
Year	2017
Justification for New Antenna	Current antenna cannot be re-tuned for use on repack 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	6 1/8 inches inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power 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
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**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	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side 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) .....	120.0 kW
	Manufacturer	
	Model	ALP16L4- HSPX-36
	Year	2017

	Justification for New Antenna	Interim antenna and transmission line needed to maintain on-air service while new primary antenna and transmission line installed.
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## 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	6 1/8 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	480 feet per run

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

	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	520 feet per run
	Justification for New Transmission Line	New transmission line required for installation of new primary antenna.

**Primary**      **Other Transmission Line Expenses Not Listed**  
**Transmission Line**      **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	400 feet per run
	Justification for New Transmission Line	Interim antenna and transmission line needed to maintain on-air service while new primary antenna and transmission line installed.

**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

**Primary Tower**

**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Move Equipment
	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?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	Yes
	Is tower documented for structural analysis?	No
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1258123
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	39° 57' 28.6" N-
	Longitude (NAD83)	121° 42' 52.9" W-
	Overall Structure Height	499.99 feet
	Support Structure Height	497.04 feet
	Ground Elevation Above Mean Sea Level (AMSL)	3495.04 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	California TV, LLC
	Date Constructed	06/18/2008

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

Facility ID	Call Sign	Service
22974	KHSL-FM	FM

#### Other Types of Users

Users
K18IS-D
Paging Service

#### Primary Tower

#### Tower Rigging Costs

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

#### Primary Tower

#### Other Tower Expenses Not Listed

Information not provided.

**Outside  
Professional**

Section	Question	Response
<b>Services Costs Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	595
	Explanation	KHSL does not have sufficient resource capacity and expertise in house to handle all of the reimbursement filing by the construction deadline for Phase 1. KHSL will hire an outside firm to ensure a timely and well managed transition.
<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	2

	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	2
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A

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

<b>Other Expenses</b>	<b>Other Expenses Not Listed</b>
	Information not provided.



## Cost Information

### Transmitters

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Transmitter ULXTE12</b>	<b>\$502,420.00</b>	<b>\$477,740.00</b>		<b>\$318,473.55</b>	
Other -- Building Addition Size: 120.0	<i>\$1,800.00</i>	\$1,800.00	10'x12' Concrete pad for Transmitter Heat exchanger and transformers.	N/A	N/A
Other Electrical Service: Installation of electrical services	<i>\$3,000.00</i>	\$3,000.00	Installation of electrical services	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$3,120.00	\$2,940.00	3"x20' metal conduit, 4 x Long metal sweeps, and 180' #4 Wire.	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 8.2 - 13 kW	\$494,500.00	\$470,000.00	N/A	\$318,473.55	N/A
<b>Sub-total</b>	<b>\$502,420.00</b>	<b>\$477,740.00</b>	<b>N/A</b>	<b>\$318,473.55</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$1,750,080.00</b>	<b>\$1,387,305.13</b>	<b>N/A</b>	<b>\$903,484.54</b>	<b>N/A</b>

### Components

Actual Information	
Description	File Name
Other -- Building Addition Size: 120.0	Information not provided.
Other Electrical Service: Installation of electrical services	Information not provided.
3" Rigid Conduit and Wiring (Cost per foot)	Information not provided.
UHF - Liquid Cooled Solid State Transmitter 8.2 - 13 kW	<div> <b>Component Description:</b> <p>KHSL Primary Transmitter. Request does not include estimated costs for shipping and taxes which will be requested with a separate invoice when these expenses are incurred.</p> </div> <div> <b>Amount:</b> <p>\$318,473.55</p> </div>

## 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 ALP16L4-HSPX-36</b>	<b>\$221,540.00</b>	<b>\$131,586.80</b>		<b>\$51,067.58</b>	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$0.00	N/A
UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized	\$89,400.00	\$56,741.75	Total cost of Interim Antenna ALP16L-HSPX-36 is \$56,741.75. Form 399 system has split estimate into two separate line items, which when combined equal \$56,741.75.	\$34,045.05	Per Proposal #20171011-935 for KHSL-003

UHF - Lower Power Side Mount, One station antenna - medium power (50- 200 kW), horizontally polarized	\$89,400.00	\$34,045.05	***System Notice: Estimate adjusted and locked because line has been superseded. ***	\$17,022.53	12/12/18 DO NOT UPLOAD INVOICES TO THIS COMPONENT. PLEASE USE NEW ANTENNA SECTION. Total cost of Interim Antenna ALP16L-HSPX- 36 is \$56,741.75. Form 399 system has split estimate into two separate line items, which when combined equal \$56,741.75.
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	\$0.00	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$22,000.00	N/A	\$0.00	N/A

Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	\$7,600.00	\$7,400.00	N/A	\$0.00	N/A
<b>Primary Antenna ATW16H4-ESPX-36H</b>	<b>\$653,440.00</b>	<b>\$290,496.01</b>		<b>\$244,291.01</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	\$0.00	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$22,000.00	N/A	\$12,645.00	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$5,625.00	N/A

UHF - Lower Power Side Mount, One station antenna -- 200-500 kW, elliptically or circularly polarized	\$227,000.00	\$129,146.01	Please see attached ERI quote 20171013- 965. Partial reimbursement has already occurred for this antenna. Estimated cost deducts prior reimbursement of \$116,250 and adds taxes + freight per ERI invoice KHSL- 003	\$109,771.01	N/A
UHF - Lower Power Side Mount, One station - 200-500 kW, horizontally polarized	\$189,500.00	\$58,125.00	***System Notice: Estimate adjusted and locked because line has been superseded. ***Estimated Cost includes tax and freight expenses totaling \$51,646.01 for primary and auxiliary antennas. See Attachment "KHSL - ERI Invoice KHSL- 003, Cover Letter, Explanation of Variance and Quotes (submitted 10.16.18).pdf."	\$58,125.00	12/12/18 DO NOT UPLOAD INVOICES TO THIS COMPONENT. PLEASE USE NEW ANTENNA SECTION. Invoice KHSL- 003 includes total sales tax and freight charges for all equipment provided by ERI and identified on invoice.

UHF - Lower Power Side Mount, One station - 200-500 kW, horizontally polarized	\$189,500.00	\$58,125.00	***System Notice: Estimate adjusted and locked because line has been superseded. ***See attached "Invoice - KHSL-001 (revised 2.28.18), Cover Letter and Explanation of Variance." Also see attachment "KHSL - ERI Primary Antenna Quote #20171013- 965."	\$58,125.00	12/12/18 PLEASE DO NOT UPLOAD NEW INVOICES HERE.
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$11,700.00	N/A	\$0.00	N/A
<b>Sub-total</b>	\$874,980.00	\$422,082.81	N/A	\$295,358.59	N/A
<b>Total for all systems</b>	\$1,750,080.00	\$1,387,305.13	N/A	\$903,484.54	N/A

## Components

**Actual Information**  
**Description**

**File Name**

Sweep test of existing antenna	<div> <div> <b>Component Description:</b>  <b>Amount:</b> </div> <div> Sweep test - primary antenna  \$1,875.00 </div> </div> <div> <div> <b>Component Description:</b>  <b>Amount:</b> </div> <div> Sweep test for interim antenna not included on invoice.  N/A </div> </div>
UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized	<div> <div> <b>Component Description:</b>  <b>Amount:</b> </div> <div> Antenna Equipment and Installation Services  \$17,022.52 </div> </div> <div> <div> <b>Component Description:</b>  <b>Amount:</b> </div> <div> Interim Antenna (ALP16L4-HSPX-36). Initial 30% payment.  \$17,022.53 </div> </div>
UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized	<div> <div> <b>Component Description:</b>  <b>Amount:</b> </div> <div> PLEASE MARK THIS INVOICE AS DENIED // Interim Antenna (ALP16L4-HSPX-36). Third 30% payment.  N/A </div> </div> <div> <div> <b>Component Description:</b>  <b>Amount:</b> </div> <div> Interim Antenna (ALP16L4-HSPX-36). Second 30% payment.  \$17,022.53 </div> </div>



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)	Information not provided.	
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	Information not provided.	
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)	<b>Component Description:</b>  <b>Amount:</b>	Primary Antenna - Side Mount Brackets. Third 30% payment. \$4,215.00
	<b>Component Description:</b>  <b>Amount:</b>	Primary Antenna - Side Mount Brackets. Second 30% payment. \$4,215.00
	<b>Component Description:</b>  <b>Amount:</b>	Primary Antenna - Side Mount Brackets. Initial 30% payment. \$4,215.00

Sweep test of existing antenna	<table> <tr> <td data-bbox="722 174 1029 208"><b>Component Description:</b></td><td data-bbox="1161 174 1377 327">Primary Antenna - System Sweep test. Third 30% payment.</td></tr> <tr> <td data-bbox="722 338 831 371"><b>Amount:</b></td><td data-bbox="1161 338 1281 371">\$1,875.00</td></tr> <tr> <td data-bbox="722 477 1029 510"><b>Component Description:</b></td><td data-bbox="1161 477 1377 629">Primary Antenna - System Sweep test. Second 30% payment.</td></tr> <tr> <td data-bbox="722 640 831 674"><b>Amount:</b></td><td data-bbox="1161 640 1281 674">\$1,875.00</td></tr> <tr> <td data-bbox="722 779 1029 813"><b>Component Description:</b></td><td data-bbox="1161 779 1377 931">Primary Antenna - System Sweep test. Initial 30% payment.</td></tr> <tr> <td data-bbox="722 943 831 976"><b>Amount:</b></td><td data-bbox="1161 943 1281 976">\$1,875.00</td></tr> </table>	<b>Component Description:</b>	Primary Antenna - System Sweep test. Third 30% payment.	<b>Amount:</b>	\$1,875.00	<b>Component Description:</b>	Primary Antenna - System Sweep test. Second 30% payment.	<b>Amount:</b>	\$1,875.00	<b>Component Description:</b>	Primary Antenna - System Sweep test. Initial 30% payment.	<b>Amount:</b>	\$1,875.00
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<b>Component Description:</b>	Primary Antenna - System Sweep test. Initial 30% payment.												
<b>Amount:</b>	\$1,875.00												
UHF - Lower Power Side Mount, One station antenna -- 200-500 kW, elliptically or circularly polarized	<table> <tr> <td data-bbox="722 1099 1029 1133"><b>Component Description:</b></td><td data-bbox="1161 1099 1331 1216">UHF Lower Power Side Mount, E-POL</td></tr> <tr> <td data-bbox="722 1227 831 1261"><b>Amount:</b></td><td data-bbox="1161 1227 1310 1261">\$109,771.01</td></tr> </table>	<b>Component Description:</b>	UHF Lower Power Side Mount, E-POL	<b>Amount:</b>	\$109,771.01								
<b>Component Description:</b>	UHF Lower Power Side Mount, E-POL												
<b>Amount:</b>	\$109,771.01												
UHF - Lower Power Side Mount, One station - 200-500 kW, horizontally polarized	<table> <tr> <td data-bbox="722 1391 1029 1424"><b>Component Description:</b></td><td data-bbox="1161 1391 1361 1507">12/12/18 Please mark this invoice as DENIED</td></tr> <tr> <td data-bbox="722 1518 831 1552"><b>Amount:</b></td><td data-bbox="1161 1518 1209 1552">N/A</td></tr> <tr> <td data-bbox="722 1657 1029 1691"><b>Component Description:</b></td><td data-bbox="1161 1657 1377 1850">Primary Antenna ATW16H4-HSPX-36H (H-pol pricing). Second 30% payment.</td></tr> <tr> <td data-bbox="722 1861 831 1895"><b>Amount:</b></td><td data-bbox="1161 1861 1297 1895">\$58,125.00</td></tr> </table>	<b>Component Description:</b>	12/12/18 Please mark this invoice as DENIED	<b>Amount:</b>	N/A	<b>Component Description:</b>	Primary Antenna ATW16H4-HSPX-36H (H-pol pricing). Second 30% payment.	<b>Amount:</b>	\$58,125.00				
<b>Component Description:</b>	12/12/18 Please mark this invoice as DENIED												
<b>Amount:</b>	N/A												
<b>Component Description:</b>	Primary Antenna ATW16H4-HSPX-36H (H-pol pricing). Second 30% payment.												
<b>Amount:</b>	\$58,125.00												

UHF - Lower Power Side Mount, One station - 200-500 kW, horizontally polarized	<div><div><b>Component Description:</b></div><div>Primary Antenna ATW16H4-HSPX-36H (H-pol pricing). Initial 30% payment.</div><div><b>Amount:</b></div><div>\$58,125.00</div></div>
Elbow complex, single channel, at antenna input, per 6 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	\$23,600.00	\$22,400.00		\$19,538.32	
Flexible Air Transmission Line - dielectric, 3"	\$23,600.00	\$22,400.00	N/A	\$19,538.32	N/A
Primary Transmission Line	\$105,040.00	\$99,840.00		\$84,221.76	
Rigid Transmission Line - copper, 6 1/8"	\$105,040.00	\$99,840.00	N/A	\$84,221.76	N/A
Sub-total	\$128,640.00	\$122,240.00	N/A	\$103,760.08	N/A
Total for all systems	\$1,750,080.00	\$1,387,305.13	N/A	\$903,484.54	N/A

Components

Actual Information	
Description	File Name

Flexible Air Transmission Line - dielectric, 3"		
	<b>Component Description:</b>	Interim Antenna - Flexible Air Transmission Line. Third 30% payment.
	<b>Amount:</b>	\$6,423.23
	<b>Component Description:</b>	Hanger Kit 3" Coaxial
	<b>Amount:</b>	\$268.63
	<b>Component Description:</b>	Interim Antenna - Flexible Air Transmission Line. Initial 30% payment.
	<b>Amount:</b>	\$6,423.23
	<b>Component Description:</b>	Interim Antenna - Flexible Air Transmission Line. Second 30% payment.
	<b>Amount:</b>	\$6,423.23

Rigid Transmission Line - copper, 6 1/8"		
	<b>Component Description:</b>	Primary Antenna - Rigid Transmission Line (Copper 6-1/8"). Third 30% payment.
	<b>Amount:</b>	\$28,073.92
	<b>Component Description:</b>	Primary Antenna - Rigid Transmission Line (Copper 6-1/8"). Initial 30% payment.
	<b>Amount:</b>	\$28,073.92
	<b>Component Description:</b>	Primary Antenna - Rigid Transmission Line (Copper 6-1/8"). Second 30% payment.
	<b>Amount:</b>	\$28,073.92

## Cost Information

### Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Tower TOWER</b>	<b>\$84,200.00</b>	<b>\$203,032.32</b>		<b>\$185,892.32</b>	
Short Tower (less than 500')	\$84,200.00	\$203,032.32	ERI proposal 20180718-730 and 20171013-965 Estimated installation cost is for both interim and primary antennas. See attachment "Invoice - KHSL-001, Cover Letter, Explanation of Variance and Quotes (submitted 4.25.2018). pdf."	\$185,892.32	Installation cost is for both Interim and Primary antennas.
<b>Sub-total</b>	<b>\$84,200.00</b>	<b>\$203,032.32</b>	<b>N/A</b>	<b>\$185,892.32</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$1,750,080.00</b>	<b>\$1,387,305.13</b>	<b>N/A</b>	<b>\$903,484.54</b>	<b>N/A</b>

### Components

Actual Information Description	File Name
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Short Tower (less than 500')

**Component Description:** Primary and Interim Antenna systems installation. Third 30% payment.

**Amount:** \$51,420.00

**Component Description:** Increased Antenna Installation Cost

**Amount:** \$14,747.00

**Component Description:** 50% of total for Increased Antenna Installation Cost, Updated crew wages along with the addition of an ERI engineered rigging plan for KHSL-TV

**Amount:** \$16,885.32

**Component Description:** Primary and Interim Antenna systems installation. Second 30% payment.

**Amount:** \$51,420.00

**Component Description:** Primary and Interim Antenna systems installation. Initial 30% payment.

**Amount:** \$51,420.00

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## 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>\$130,450.00</b>	<b>\$133,425.00</b>		<b>\$0.00</b>	
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$7,360.00	\$7,000.00	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
Prepare request for Special Temporary Authorization	\$4,100.00	\$3,000.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	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
Project management of the transition	\$94,010.00	\$99,675.00	Per Widelity quote KHSL-TV Strategic Support 12 /16/18 (uploaded into LMS)	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
<b>Sub-total</b>	\$130,450.00	\$133,425.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$1,750,080.00	\$1,387,305.13	N/A	\$903,484.54	N/A

## Components

Information not provided.

## Cost Information

### Other Expenses

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$29,390.00</b>	<b>\$28,785.00</b>		<b>\$0.00</b>	
Develop and air announcement of upcoming channel change	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
Equipment Storage	<i>\$1,200.00</i>	\$1,200.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A

MVPD Notification of Channel Change	<b>\$5,000.00</b>	\$5,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$29,390.00	\$28,785.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$1,750,080.00	\$1,387,305.13	N/A	\$903,484.54	N/A

## Components

Information not provided.

**Cost  
Information**

**Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,750,080.00	\$1,387,305.13	\$903,484.54

**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>Robert S. Prather , Jr</b> . <i>CEO</i></p> <p>12/17/2018</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>Robert S. Prather , Jr</b> . <i>CEO</i></p> <p>12/17/2018</p>

## Attachments