

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility 72300 Service: DTV Call WHNS Channel: 17 (UHF)

ID:

Sign:

File **0000027830**

Number:

FRN: **0018223693** Date **03/15**

Submitted: /2019

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
MEREDITH CORPORATION	Joshua Pila 1716 LOCUST STREET DES MOINES, IA 50309 United States	+1 (515) 284-3000	RegAffairs@meredith.	Corporation

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Information

Preparer Contact Name and Information

Applicant	Address	Phone	Email

The Preparer is same as the reimbursement contact.

Broadcaster Information and Transition Plan Question Response

Will the station be sharing equipment with	No
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.	
Briefly describe transition plan	The WHNS

S repack plan includes the replacement of main transmitter/filter, addition of a transitional antenna, and a new main antenna. It also includes all the analysis, engineering evaluation and electrical systems, tower work and filing costs.

Transmitters

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

Primary Transmitter

Existing Transmitter Information

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter Manufacturer and Type	Manufacturer	
	Model	Comark IOX /DCX
	Year	1998
	Туре	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	19.18 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?	Yes
	Manufacturer	
	Model	Parallax HPTV- PRLX-U15
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	24.3 kW
	Justification for New Transmitter	Current transmitter is not returnable and us no longer available. A new solid state is proposed. A new IOT quote is included in the attachments along with solid state comparison for supporting an elliptical antenna.

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	300 kVA
	Rigid Conduit and Wiring	Yes
	Size	4 inches
	Length	30.0 feet
	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Туре	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other 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

Primary Transmitter **Other Transmitter Cost Not Listed**

Transmitter Information not provided.

Antennas

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

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna	Class	Full Power
Manufacturer and Type	Mounting	Top 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)	400.0 kW

Manufacturer	
Model	TFU- 22ETT-R CT3
Year	2000

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?	No
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna	Class	Full Power
Manufacturer and Types	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)	363.0 kW
	Manufacturer	

Model	TFU-21ETT /VP-R CT3
Year	2017
Justification for New Antenna	Replace single channel antenna that's not able to be retune.

Other Antenna Costs

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	Yes
	transmission line and antenna?	

Other Antenna Cost Not Listed

Information not provided.

Interim Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna	Class	Full Power
Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Broadband Panel
	Number of Stations Supported	1
	Number of Panels/Bays	8
	Lower Limit	470.00 MHz
	Upper Limit	698.00 MHz
	Design power capacity in use	50.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	250.0 kW
	Manufacturer	
	Model	TFU-8WB- R C160
	Year	2017

Justification for New Antenna	The
	antenna is
	to be used
	as a interim
	to allow top
	antenna
	replacement

Interim Antenna

Other Antenna Costs

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

Interim Antenna

Other Antenna Cost Not Listed

Information not provided.

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

Primary Transmission

Existing Transmission Line

Section	Question	Response
Existing Transmission Line Description	Type of change	Utilize Existing
	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	Manufacturer	Dielectric
Line Manufacturer and Type	Туре	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1690 feet per run

Primary

Other Transmission Line Expenses Not Listed

Transmission Line		Description	
	Additional line	We need additional line parts and elbows to connect to current feedline	
	Feeline antenna switch	We have a need to switch between antennas during the transition period	

Interim

New Transmission Line

Transmission	Section	Question	Response
	New Transmission Line	Use	Interim
	Costs	Description of Use	N/A
		Change Type	Purchase New
		Туре	Flexible Air
		Diameter	3 inches
		Segment Length	N/A
		Other Segment Length	
		Number of parallel runs	1
		Length	900 feet per run
		Justification for New Transmission Line	The line will be used during the transition phase and will act as an interim

Interim Other Transmission Line Expenses Not Listed

Transmission loine tion 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	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?	No
	Is tower compliant with Rev G?	No
Existing Tower Structure	Do you have a tower registration number?	Yes
Registration	ASR Number	1002140
Coordinates (NAD83 (North American Datum of	Latitude (NAD83)	35° 10' 56.0" N-
1983))	Longitude (NAD83)	082° 40' 55.0" W-
	Overall Structure Height	1610.87 fe
	Support Structure Height	1559.04 fe
	Ground Elevation Above Mean Sea Level (AMSL)	3429.09 fe

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Meredith Corporation - WHNS
Date Constructed	06/30/2009

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	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
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	20
	Explanation	We will need outside engineering support to complete documentation and analysis
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	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	Prepare and file Form FCC Construction Permit Application	Yes
Services	For Auxiliary Facility	Yes
	For Main Facility	Yes

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

Outside
Other Professional Services Expenses Not Listed
Professional Services ©qstsided.

Other Expenses

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Facility Expenses	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
Permit and Filing Costs	Local Zoning	Yes
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	Yes
	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?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	No
	Does this relocation require MVPD Notification of a Channel Change?	No

Other Expenses Not Listed

Expenses 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
Primary Transmitter Parallax HPTV-PRLX- U15	\$1,025,030.00	\$822,268.00		\$642,433.40	
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$748,088.00	N/A	\$642,433.40	Original estimate was incorrectly entered on form
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Transformer 3 phase /480v - 300 KVA	\$36,800.00	\$35,000.00	N/A	N/A	N/A
4" Rigid Conduit and Wiring (Cost per foot)	\$3,030.00	\$2,880.00	N/A	N/A	N/A
Sub-total	\$1,025,030.00	\$822,268.00	N/A	\$642,433.40	N/A
Total for all systems	\$2,525,087.00	\$1,984,245.00	N/A	\$881,587.10	N/A

Components

Actual Information		
Description	File Name	

UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	Component Description:	Comark Invoice 20 percent
	Amount:	downpayment \$126,138.80
	Component Description:	Comark invoice for 70 percent of order at H-POL level
	Amount:	\$441,485.80
	Component Description:	Comark invoice for 10 percent of payment H-POL power level
	Amount:	\$74,808.80
Switchgear - industrial 800 amp	Information not provided.	
Transformer 3 phase/480v - 300 KVA	Information not provided.	
4" Rigid Conduit and Wiring (Cost per foot)	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 Interim Antenna TFU-8WB- R C160	Predetermined Cost Estimate \$241,155.00	Estimated Cost \$51,325.00	Estimated Cost Justification	Actual Cost \$46,192.50	Actual Cost Justification
UHF - Lower Power Side Mount, One station - 200-500 kW, horizontally polarized	\$189,500.00	\$0.00	N/A	N/A	N/A
UHF – Broadband Panel, Side Mount Auxiliary /Interim, 250 horizontally polarized	\$44,925.00	\$44,925.00	N/A	\$40,432.50	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$5,760.00	N/A
Primary Antenna TFU-21ETT /VP-R CT3	\$308,530.00	\$216,861.00		\$185,229.90	

UHF - High Power Top Mount (200-1000 kW), One station antenna, elliptically or circularly polarized	\$289,500.00	\$200,163.00	N/A	\$170,201.70	N/A
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$10,298.00	N/A	\$9,268.20	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$5,760.00	N/A
Sub-total	\$549,685.00	\$268,186.00	N/A	\$231,422.40	N/A
Total for all systems	\$2,525,087.00	\$1,984,245.00	N/A	\$881,587.10	N/A

Components

Actual Information Description	File Name
UHF - Lower Power Side Mount, One station - 200- 500 kW, horizontally polarized	Information not provided.

UHF â€" Broadband Panel, Side Mount Auxiliary/Interim, **Component Description:** Invoice for 45 250 horizontally polarized percent of Interim antenna MAN00054 Amount: \$20,216.25 **Component Description:** Invoice MAN00048 for 45 percent of Interim antenna Amount: \$20,216.25 Sweep test of existing antenna **Component Description:** 45 percent payment of **REPACK** sweep Amount: \$2,880.00 **Component Description:** 45 percent payment of REPACK SWEEP Amount: \$2,880.00 UHF - High Power Top Mount (200-1000 kW), One **Component Description:** 10 percent of station antenna, elliptically antenna total/ or circularly polarized does not include Vpol and elbow section on invoice Amount: \$18,911.30 80 percent invoice **Component Description:** amount does not include Vpol, Elbow and sweep \$151,290.40 Amount:

Elbow complex, single channel, at antenna input,		
per 6 1/8. feedline (if needed)	Component Description:	10 percent of
p =		elbow complex
	Amount:	\$1,029.80
	Component Description:	80 percent invoice
		for Elbow complex
	Amount:	\$8,238.40
Sweep test of existing antenna		
antonna	Component Description:	10 percent of
		repack sweep
	Amount:	\$640.00
	Component Description:	80 percent of
		repack sweep
	Amount:	\$5,120.00

Cost Information

Transmission Line

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

Description Interim Transmission Line	Predetermined Cost Estimate \$53,100.00	Estimated Cost \$45,676.00	Estimated Cost Justification	Actual Cost \$0.00	Actual Cost Justification
Flexible Air Transmission Line - dielectric, 3"	\$53,100.00	\$45,676.00	N/A	N/A	N/A
Primary Transmission Line	\$39,937.00	\$39,937.00		\$3,453.30	
Feeline antenna switch	\$36,100.00	\$36,100.00	We have a need for a feedline switch to select either the interim or main antenna during the transition period.	N/A	N/A
Additional line	\$3,837.00	\$3,837.00	N/A	\$3,453.30	N/A
Sub-total	\$93,037.00	\$85,613.00	N/A	\$3,453.30	N/A
Total for all systems	\$2,525,087.00	\$1,984,245.00	N/A	\$881,587.10	N/A

Components

Actual Information Description	File Name
Flexible Air Transmission Line - dielectric, 3"	Information not provided.

Feeline antenna switch	Information not provided.	
Additional line		
	Component Description:	80 percent of
		extra line parts
	Amount:	\$3,069.60
	Component Description:	10 percent of
		feedline parts
	Amount:	\$383.70

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).

			Estimated		
Described	Predetermined	Estimated	Cost	A. () O (Actual Cost
Description	Cost Estimate	Cost	Justification		Justification
Primary Tower TOWER	\$657,800.00	\$625,000.00		\$0.00	
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	Costs cover the needed work to complete installation of both the main and interim antennas and removal of old line to support increase tower loading	N/A	N/A
Major tower reinforcement /modifications	\$421,000.00	\$400,000.00	N/A	N/A	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	N/A	N/A
Sub-total	\$657,800.00	\$625,000.00	N/A	\$0.00	N/A

Total for all	\$2,525,087.00	\$1,984,245.00	N/A	\$881,587.10	N/A
systems					

Components

Information not provided.

Cost Information

Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$163,845.00	\$153,745.00		\$0.00	
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	\$79,995.00	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 - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$4,000.00	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	\$2,050.00	\$1,500.00	N/A	N/A	N/A
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	\$1,580.00	\$1,500.00	N/A	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
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	\$2,105.00	\$2,000.00	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
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
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$3,160.00	\$1,500.00	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	\$3,680.00	\$3,500.00	N/A	N/A	N/A
File request for Special Temporary Authorization					

Total for all	\$2,525,087.00	\$1,984,245.00	N/A	\$881,587.10	N/A
systems					

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
Other Expenses	\$35,690.00	\$29,433.00		\$4,278.00	
Equipment Delivery and Handling Charges	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$2,500.00	\$2,500.00	These are costs for trash removal	N/A	N/A
Non-zoning permits	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Local Zoning	\$5,000.00	\$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
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A

DTV Medical Facility Notification	\$11,550.00	\$5,348.00	N/A	\$4,278.00	N/A
Sub-total	\$35,690.00	\$29,433.00	N/A	\$4,278.00	N/A
Total for all systems	\$2,525,087.00	\$1,984,245.00	N/A	\$881,587.10	N/A

Components

File Name	
Information not provided.	
Component Description: Amount:	100 percent invoice for medical notifications \$4,278.00
	Information not provided. Component Description:

Cost Information

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$2,525,087.00	\$1,984,245.00	\$881,587.10

Reimbursem	entestiatus	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

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.

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

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

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.

I declare, under penalty of perjury, that I am an authorized representative of the abovenamed applicant for the Authorization(s) specified above.

Larence K Oaks

Vice
President
of
Technology
Meredith
LMG

03/15/2019

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).

- 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.
- The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.
- The above-named entity acknowledges that all certifications and attached documentation are considered material representations.

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

- 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 abovenamed applicant for the Authorization(s) specified above. Larence K
Oaks
Vice
President
of
Technology
Meredith
LMG

03/15/2019

Attachments